



**State of Rhode Island  
Department of State - Business Services Division**

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Annual Report for the year: 2024

**Limited Liability Company**

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 1713825	2. Exact name of the Limited Liability Company 3. White Rose Swim, LLC		
4. NAICS Code 5. 454110	4. Brief description of the character of business conducted in Rhode Island Online Swimwear Sales		
6. State of Formation 7. Rhode Island			
6. Principal Office Address 19 Heritage Dr		City Lincoln	State RI
Zip 02865			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Mariah Paolino		Contact Title Member	
Street Address 19 Heritage Dr		City Lincoln	State RI
Zip 02865			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
Name of Authorized Person Mariah Paolino			Date 6/24/24
Signature of Authorized Person <i>Mariah Paolino</i>			

FILED  
JUN 25 2024  
BY MTWEN EJ

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