	RI SOS	Filing Number: 202457464840	Date: 6/27/2024 4:00:00 PM	
	State of Rhode Island Department of State - Business Services		s Division	REC'D
Annual Report for the year: Limited Liability Company → Filing period: February 1 - May 1				RIDOS BS 27 PM2:13

1. Entity ID Number 2. Exact name of the Limited Liability Company 4. Brief description of the character of business conducted in Rhode Island asseine. 5. State of Formation 6. Principal Office Address City State Zip RI DOS MADE NON-SUBSTANTIVA 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title Street Address City State Zip le 65 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 Signature of Authorized Person

FILED

MAIL TO:

Annual Limited

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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