

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

RÉCETVED SECRETARY OF STATE CORPORATIONS DIV

Annual Report for the year: **Limited Liability Company**

2024 JUL 15 PM 1: 24

→ 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	2. Exact name of the Limited Liability Company			
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001739791	Woodhaus, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
721191	Short term	rental		
5. State of Formation	SNOW ICHAE			
P1				
6. Principal Office Address		City	State	Zip
24 Rence ct.		Cheshive	CT	06410
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Savan Faconti		Contact Title		
Street Address		City	State	Zip
26 Pense ct.		Cheshive	CT	06410
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			Date / /	
Sarah Faconti			7/11/24	
Signature of Agthorized Person My M One of the state of				

JUL 15 2024 BY J2HOB

MAIL TO:

Division of Business Services

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