




State of Rhode Island  
Department of State - Business Services Division

REC'D RIBOS BSD  
24 JUL 16 11:58:02

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<br><b>1736304</b>  |  | 2. Exact name of the Limited Liability Company<br><b>Mood Tonics and Elixirs LLC</b>                                 |                    |
| 3. NAICS Code<br><b>722515</b>   |  | 4. Brief description of the character of business conducted in Rhode Island<br><b>Non-alcoholic drinks and teas.</b> |                    |
| 5. State of Formation<br><b>Rhodesia Island</b>  |  |  |                    |
| 6. Principal Office Address<br><b>95 Lynn circle</b>   |  | City<br><b>East Greenwich</b>  | State<br><b>RI</b> |
| Zip<br><b>02818</b>  |  |  |                    |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person  |  |  |                    |
| Contact Name<br><b>Victoria Gehlmeyer</b>  |  | Contact Title<br><b>Owner</b>  |                    |
| Street Address<br><b>95 Lynn circle</b>  |  | City<br><b>East Greenwich</b>  | State<br><b>RI</b> |
| Zip<br><b>02818</b>  |  |  |                    |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.  |  |  |                    |
| 9. <i>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.</i> |  |  |                    |
| Name of Authorized Person<br><b>Victoria Gehlmeyer</b>   |  | Date<br><b>07/15/2024</b>  |                    |
| Signature of Authorized Person<br>  |  |  |                    |

**FILED**

**JUL 16 2024**

**BY KLDFG**

**AA 11:59 AM**

**MAIL TO:**  
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