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State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2023
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	2 Exact name of the Limited Liability Company			
001738285	Matt Brayman, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island Judge, announce, design, and manage horse shows, all ancillary purposes, and all other lawful purposes.			
711320 5. State of Formation RI				
6. Principal Office Address		City	State	Zip
93 Prosser Trail		Charlestown	RI	02813
7 Mailing Address of Limite	ed Liability Company and Name or	Title of Contact Person	1	
Contact Name Matthew Brayman		Contact Title Manager		
Street Address 93 Prosser Trail		Charlestown	State RI	^{Zip} 02813
8. The Resident Agent info	mation currently of record with the	RI Department of State is accura	ite. Changes requir	e filing Form 642.
	ry, I declare and affirm that I hav tatements contained herein are		ng any accompany	ring schedules and
Name of Authorized Person			Date 11 (1/2024 0 = 25 AM 507	
Matthew Brayman			11/1/2024 9 m/35 AM EDT	
Signature of Authorized Pe	rson	<u>-</u>		
Matthew Brayman				

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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov