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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 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			
001767252		SAZES LL		
3. NAICS Code 452990 5. State of Formation	4. Brief description of the character of business conducted in Rhode Island Cencral Sales ' — E commerce '			
h-L				
6. Principal Office Address		City	State	Zip
443 Colum	BUSANE APT 1	PAWTUCKS	PI	0286/
7. Malling Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name DLUBUNMI OYEWALE		Contact Title DWN ER		
Street Address A4A COULINA	BUS AVE APTI	PAW CUCKER	State	240 02851
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	BUMM I	YEWARE	Date /	29/25
Signature of Authorized Person				

FILED 11:37

JAN 29 2025

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov BY RZ48P

FORM 632 - Revised: 12/2023