

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025
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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
001689575	The Goodrich Group LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
454111	Ecommerce Sale	es			
5. State of Formation					
Texas					
6. Principal Office Address		City	State	Zip	
607 Leander Drive Suite 600		Leander	TX	78641	
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person	·		
Contact Name		Contact Title			
Todd Lammi		Member			
Street Address 607 Leander Drive Suite 600		City Leander	State TX	^{Zip} 78641	
8. The Resident Agent infor	mation currently of record with	the RI Department of State is accu	rate. Changes requi	re filing Form 642.	
	y, I declare and affirm that I I tatements contained herein a	have examined this report, includer are true and correct.	ling any accompan	ying schedules an	ıď
Name of Authorized Person		Date			
Todd Lammi		Jan-28-2025			
Signature of Authorized Per	75ON				

MAIL TO:

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

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

FORM 632 - Revised: 12/2023