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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.

2	FILED
) 1	TFB 0 3 2025
	BY <u>JU</u>

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1. Entity ID Number 001715767	2. Exact name of the Limit FII, LLC	2. Exact name of the Limited Liability Company FII, LLC				
3. NAICS Code 423990	Brief description of the character of business conducted in Rhode Island Advertising Specialty Distributor					
5. State of Formation Ωhada Island						
6. Principal Office Address One Weingeroff Blvd	I	City Cranston	State RI	Zip 02910		
	ed Liability Company and Name					
Contact Name Paul McConnell		Contact Title Manager				
Street Address One Wein	geroff Blvd	City Cranston	State RI	^{Zip} 02910		
8. The Resident Agent infor	mation currently of record with t	the RI Department of State is accu	rate. Changes require	e filing Form 642.		
	l declare and affirm that I have tatements contained herein ar	e examined this report, including re true and correct.	g any accompanyin	g schedules and		
Name of Authorized Person			Date	١		
Paul McConnell			1/30	125		
Signature of Authorized Per	Son		•	-1		

MAIL TO:

Division of Business Services

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

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