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## State of Rhode Island Department of State - Business Services Division

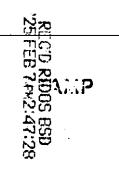
2025

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 001768225	2. Exact name of the Limited Liability Company Rosewood LLC			
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island     House rented to summer tourists			
5. State of Formation Rhode Island				
6. Principal Office Address	— A ,- ,- ,- ,	City	State	Zip
14 Rosewood Avenue		Narragansett	RI	02882
7. Mailing Address of Limited I	iability Company and Name or Titl	e of Contact Person		
Contact Name Sarah Monck		Contact Title Member		
Street Address 11 Tyler City Road		City Orange	State CT	<sup>Zip</sup> 06477
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 Sarah K Monck			Date 2/5/25	
Signature of Authorized Perso	roull			•

**MAIL TO:** 

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

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

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