RI SOS Filing Number: 202565357870 Date: 2/12/2025 4:00:00 PM

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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.

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|--|--|-----------------------|---|-------------|---------------------|--|--|
| 1. Entity ID Number<br>001774826   | 2. Exact name of the Limited Liability Company Send It Like Seamus, LLC                                |                       |   |             |                     |  |  |
| 3. NAICS Code <b>551112</b>  | Brief description of the character of business conducted in Rhode Island     Hold and manage a vessel. |                       |   |             |                     |  |  |
| 5. State of Formation RI   |  |                       |   |             |                     |  |  |
| 6. Principal Office Address 20 Chartier Circle   |  | City<br>Newpart       |   | State<br>RI | Zip<br>02840        |  |  |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person  |  |                       |   |             |                     |  |  |
| Contact Name Jerome R. Kirby, III  |  | Contact Title Manager |   |             |                     |  |  |
| Street Address 20 Chartier Circle  |  | City<br>Newport       |   | State<br>RI | Zip<br><b>02840</b> |  |  |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.  |  |                       |   |             |                     |  |  |
| 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  |  |                       |   | Date        |                     |  |  |
| Jerone R. Kirby, III   |  |                       |   | 01/16/2025  |                     |  |  |
| Signature of Authorized Person   |  |                       |   |             |                     |  |  |
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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

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