



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$50.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

*Filing Period: February 1 - May 1*

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025:** 2025

**1. ID No.** 001685066

**2. Exact Name of the Limited Liability Company** PMI Nutrition International, LLC

**3. State of Formation**

State: DE

**NAICS CODE**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

311119

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

A BRANDED FEED AND PET FOOD COMPANY SERVICING INTERNATIONAL  
CUSTOMERS WITH  
ZOO, LAB, COMPANION ANIMAL, PET AND PRODUCTION AGRICULTURE  
CUSTOMERS UNDER  
THE  
BRAND NAMES OF PMI NUTRITION, MAZURI AND LAB DIET.

**5. Principal Office Address**

No. and Street: 4001 LEXINGTON AVENUE NORTH

City or Town: ARDEN HILLS

State: MN Zip: 55126 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: Contact Title:

No. and Street: 4001 LEXINGTON AVENUE NORTH

City or Town: ARDEN HILLS

State: MN Zip: 55126 Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

**8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 18 Day of February, 2025 at 12:07:04 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.***

By KELLY LETTMANN

Signature of Authorized Person

Form No. 632  
Revised 09/07

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