RI SOS Filing Number: 202565779140 Date: 2/24/2025 4:00:00 PM



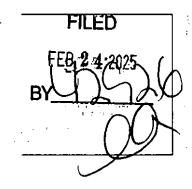
State of Rhode Island **Department of State - Business Services Division**

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.



1. Entity ID Number 001712512	2. Exact name of the Limited Liability Company Kalypso LLC				
3. NAICS Code 541490	· ·	Brief description of the character of business conducted in Rhode Island Own and operate marine vessel			
5. State of Formation					
6. Principal Office Address		City	State	Zip	
32 Cole Street		Warren	RI	02885	
7. Mailing Address of Limited	d Liability Company and Name or Tit	le of Contact Person	1		
Contact Name Michael W. Miller		Contact Title Registered Agent			
Street Address 122 Touro Street		City Newport	State	^{Zip} 02840	
8. The Resident Agent inform	mation currently of record with the RI	Department of State is accu	urate. Changes requir	e filing Form 642.	
, , , , ,	/, I declare and affirm that I have e atements contained herein are tru	• •	ding any accompany	ring schedules and	
Name of Authorized Person	ANOREW	REW GREEN Date 02/06/25		106/25	
Signature of Authorized Pers	son Jululu				

MAIL TO:

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

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