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Department of State - Business Services Division

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	. Entity ID Number 2. Exact name of the Limited Liability Company				
001777669	Junebug's Walks 8	Junebug's Walks & Care			
3. NAICS Code 812910	4. Brief description of the character of business conducted in Rhode Island Junebug's Walks & Care provides dog walking, pet care, and related services. Our business focuses on ensuring the happiness and wellbeing of pets through personalized care and a commitment to quality services.				
5. State of Formation Rhode Island					
6. Principal Office Address		City	State	Zip	
555 N Mail St #1433		Providence	RI	02904	
7. Mailing Address of Limited	Liability Company and Name or T	itle of Contact Person		•	
Contact Name Giovanni Torres		Contact Title Owner			
Street Address 555 N Main st #1433		City Providence	State	^{Zip} 02904	
8. The Resident Agent inform	nation currently of record with the f	RI Department of State is accur	ate. Changes requir	e filing Form 642.	
	r, I declare and affirm that I have atements contained herein are tr		ng any accompany	ring schedules and	
Name of Authorized Person			Date		
Giovanni Torres			2/1/2025		
Signature of Authorized Pers	son	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,		

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MAIL TO:

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

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