RI SOS Filing Number: 202566824380 Date: 3/10/2025 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	2. Exact name of the Limited Liability Company			
001735181	Perfectly Personalizd, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
315990	Producing personalized products			
5. State of Formation				
RI				
6. Principal Office Address	1	City	State	Zip
14 Sorrell Road		North Providence	RI	02904
7. Mailing Address of Limite	Liability Company and Name or Title of	f Contact Person	•	<u> </u>
Contact Name Lauren Sciarretta		Contact Title Member		
Street Address 14 Sorrell Road		North Providence	State RI	^{Z_{ip}} 02904
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			Date	
Lauren Sciarretta			2	2/25
Signature of Authorized Person				

· FILED

MAIL TO:

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

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