	State of Rhod Office of the Secre	
	Division Of Busine	ess Services
	148 W. River	
1(2)	Providence RI 02	
1030	(401) 222-3	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. <u>001770822</u>		
2. Exact Name of the Limited Liability Company $\underline{M3NDING TOOLS LLC}$		
3. State of Formation		
State: <u>RI</u>		
NAICS CODE		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.		
<u>236118</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island		
GENERIC BUSINESS PURPOSE		
5. Principal Off	ice Address	
No. and Street:	700 NARRAGANSETT PARK DR	
City or Town:	<u>STE 100</u> <u>PAWTUCKET</u>	State: <u>RI</u> Zip: <u>02861</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: No. and Street:	Contact Title: <u>700 NARRAGANSETT PARK DR</u> <u>STE 100</u>	
City or Town:	PAWTUCKET	State: <u>RI</u> Zip: <u>02861</u> Country: <u>USA</u>

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

REGISTERED AGENTS INC 47 WOOD AVE SUITE 2 BARRINGTON , RI 02806

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

**Signed this 14 Day of March, 2025 at 3:48:24 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 <u>ROBIN JONES</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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