State of Rhode Island
Department of State - Business Services Division

FILED
MAR 19 2025
BY 295900 25026

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
001782186	GUSTAFSON SOJOURN, LLC
3. NAICS Code	**4. Brief description of the character of business conducted in Rhode Island**
721310	PROPERTY TO BE RENTED OR LIVED IN (by owner), protected legally also by being classified as an LLC
5. State of Formation	
Rhode Island	

6. Principal Office Address	City	State	Zip
33 Spruce Lane	Bristol	RI	02809

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name	**Contact Title**		
Erik Gustafson	Sole owner/member of LLC above		
Street Address	**City**	**State**	**Zip**
10 Hallets Point #721	Astoria	NY	11102

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
Erik Gustafson	8 March 2025
Signature of Authorized Person	
Erik Gustafson	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov