

State of Rhode Island Department of State - Business Services Division

→ Filing period: February 1 - May 1

 \rightarrow Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number 001687283	2. Exact name of the Limited Liability Company Unique PI8z LCC					
3. NAICS Code 339999	Brief description of the character of business conducted in Rhode Island Home decor and accessories made out of license plates					
5. State of Formation RI						
6. Principal Office Address 65 Summit Ave		City West Warwick	State RI	Zip 02893		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Nicole OBrien		Contact Title Owner	Contact Title Owner			
Street Address 65 Summit Ave		^{City} West Warwick	State RI	^{Zip} 02893		
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 Nicole OBrien -			Date 3-)4	3-14-25		
Signature of Authorized Person						

MAIL TO:

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

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

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