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	25 REC:
State of Rhode Island	
Department of State - Business Services Division	25 F44:
Annual Report for the year: 20 25 Limited Liability Company	950 15:
Filing period: February 1 - May 1	<del>j</del> }-3
→ Filing Fee: \$50.00	, , , , , , , , , , , , , , , , , , ,

1. Enlity ID Number 4-75-3154	2. Exact name of the Limited Liability Company Saddlepoint Advisor				
3. NAICS Code 52 3940	Bnef description of the character of business conducted in Rhode Island     Investment advisor				
5. State of Formation					
RI					
6 Principal Office Address	<u></u>	City	State	Zip	
56 Alfred Stone Road		Providence	RI	02906	
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person			
Contact Name Donald Formal	n	Contact Title Sole Memi	Nact Title Sole Member		
Street Address 56 Alfred Stone Road		City Providence	State RI	<sup>Zip</sup> 02906	
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 di statements, and that all statem			ing any accompany	ing schedules and	
Name of Authorized Person			Date	Date	
Donald Forman			3/25/25		
Signature of Authorized Person					

MAR 25 2025

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.ni.gov