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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2020

→ Filing period: February 1 - May 1

→ 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	2. Exact name of the Limited Liability Company				
001659504	NEW ENGLAND REP GROOP LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
238120	INDEREDDENT SAKES REP. FOR MULTIPLE				
5. State of Formation	BRANDS ZN FOOTWEAR				
RZ					
6. Principal Office Address		City	State	Zip	
615 INDZAN AVE		MEDULEROUN	RZ	02842	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name	Contact Title				
12257AN RANGS		OUNER			
Street Address		City	State	Zip /	
615 ZNDZAN AVE		MEDILEZOUS	RZ_	02842	
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			
TRESTAN KAYNES		4/2/25			
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 APR 03 2025 BY TBQC5 E8 9:56