RI SOS Filing Number: 202569707040 Date: 4/9/2025 4:00:00 PM

2. Exact name of the Limited Liability Company

Brief description of the character of business conducted in

To the	
35	

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **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.

APR 19 2025 BY	
Rhode Island	
IMIQUE ISIANU	

FILED

State of Formation

1. Entity ID Number

City

State

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name

Neerle

6 Principal Office Address

Contact Title

Menbe

State

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

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