	State of Rh			Fee: \$50.00
	Office of the Se	cretary of Sta	ate	
	Division Of Bu			
	148 W. Ri			
1636	Providence R (401) 22			
		22 3040		
Limited Liabilit Annual Report				
Filing Period: Fel				
In accordance wi	th R.I.G.L. 7-16-66(d), each limited lia	ahility company	failing or	
refusing to file its	annual report within thirty (30) days	after the time p		
law (R.I.G.L. 7-10	6-66(b&c)) is subject to a penalty fee	of \$25.00.		
ANNUAL REPO	RT YEAR - ENTER THE CURRENT YE	ar <b>2025</b> : <u>202</u>	<u>5</u>	
1. ID No. <u>00</u>	0489499			
2. Exact Name	of the Limited Liability Company $\overline{\mathrm{NG}}$	ORTHWEST R	EGISTEREI	O AGENT LLC
3. State of Forr	nation			
State: <u>WY</u>				
	NAICS C	ODE		
•	it NAICS Code that best describes the state of codes <u>here.</u> More information on			
<u>492210</u>				
4. Brief Descrip Island	tion of the Character of the Busines	s Which is Actu	ally Conduct	ted in Rhode
REGISTERED	AGENT AND INCORPORATION	SERVICE		
5. Principal Off	ice Address			
5. Principal Off No. and Street:				
-	ice Address <u>522 W RIVERSIDE AVENUE</u> <u>SUITE N</u>			
-	522 W RIVERSIDE AVENUE	State: <u>WA</u>	Zip: <u>99201</u>	Country: <u>USA</u>
No. and Street: City or Town:	<u>522 W RIVERSIDE AVENUE</u> <u>SUITE N</u>			
No. and Street: City or Town:	522 W RIVERSIDE AVENUE SUITE N SPOKANE ess of Limited Liability Company and			
No. and Street: City or Town: 6. Mailing Addre	522 W RIVERSIDE AVENUE SUITE N SPOKANE ess of Limited Liability Company and			
No. and Street: City or Town: 6. Mailing Addre Contact Name:	522 W RIVERSIDE AVENUE SUITE N SPOKANE ess of Limited Liability Company and Contact Title:	d Name or Title	of Contact P	

## 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

REGISTERED AGENTS INC. 47 WOOD AVE. STE 2 BARRINGTON , RI 02806

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 17 Day of April, 2025 at 1:56:38 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By TAYLOR NEWMAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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