

State of Rhode Island

Department of State - Business Services Division

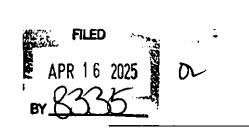
Annual Report for the year: Limited Liability Company

2025

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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



| 1. Entity ID Number 116806 | 2. Exact name of the Limited Liability Company Rhode Island Youth Super Liga, LLC | | | | |
|--|---|--|-------------------------|-------------------------|--|
| 3. NAICS Code 711310 | Brief description of the character of business conducted in Rhode Island To operated soccer clinics, tournameents, leagues, organizations, and other related activities | | | | |
| 5. State of Formation | | | | | |
| 6. Principal Office Address | | City | State | Zip | |
| 24 Shaws Lane | | Bristol | RI | 02809 | |
| 7. Mailing Address of Limited | Liability Company and Name or | Title of Contact Person | <u> </u> | | |
| Contact Name Oscar DeLemos | | Contact Title Member | | | |
| Street Address 24 Shaws Lane | | City Bristol | State RI | ^{Zip} 02809 | |
| 8. The Resident Agent inform | nation currently of record with the | RI Department of State is acc | curate. Changes require | I e filing Form 642. | |
| 9. Under penalty of perjury statements, and that all sta | , I declare and affirm that I have atements contained herein are t | e examined this report, inclu true and correct. | iding any accompany | ing schedules and | |
| Name of Authorized Person Lisa DeLemos | | | Date 4/8/25 | | |
| Signature of Authorized Pers | on W | | | | |

Division of Business Services

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