RI SOS Filing Number: 202571113800 Date: 4/22/2025 4:00:00 PM



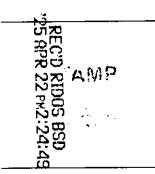
State of Rhode Island Department of State - Business Services Division

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.



C. **_				
Entity ID Number	2. Exact name of the Limited Liability Company			
001734313	SK022 LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
812990	OWN AND MANAGE PERSONAL PROPERTY			
5. State of Formation				
DE				
6. Principal Office Address		City	State	Zip
455 N. Cityfront Plaza Drive, Suite 1730		Chicago	IL	60611
7. Mailing Address of Limite	ed Liability Company and Name or	Title of Contact Person		
Contact Name Robin Zanc		Contact Title Manager		
Street Address 455 N. Cityfront Plaza Drive, Suite 1730		City Chicago	State IL	Zip 60611
8. The Resident Agent infor	mation currently of record with the	RI Department of State is ac	curate. Changes requir	re filing Form 642.
	ry, I declare and affirm that I have tatements contained herein are		uding any accompan	ying schedules and
Name of Authorized Person			Date	
Robin Zane			04-21-2025	
Signature of Authorized Pe	rson			
73me				

FILED

APR 2 2 2025

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov