RI SOS Filing Number: 202572150840 Date: 4/29/2025 4:00:00 PM



## **Department of State - Business Services Division**

FILED STANGE APR 29 2025



Annual Report for the year: 2025 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.

Entity ID Number	2. Exact name of the Limited Liability Company			
001679445	CLAUDIA'S CREATIONS, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
311811	CAKES			
5. State of Formation	<del>  </del>			
₹:				
6. Principal Office Address		City	State	Zip
1958 SMITH STREET		NORTH PROVIDENCE	RI	02911
7. Mailing Address of Limite	d Liability Company and Name or	Title of Contact Person		
Contact Name CLAUDTA M. FRATIELLO		Contact Title MEMBER		
Street Address 1958 SMITH STREET		City NORTH PROVIDENCE	State R I	<b>Z</b> ip 02911
3. The Resident Agent infor	mation currently of record with the	RI Department of State is accurate	e. Changes requ	ire filing Form 642
	declare and affirm that I have latements contained herein are	examined this report, including a true and correct.	ny accompanyi	ng schedules and
Name of Authorized Person			Date	
CLAURIA M. FRATIELLO			3/5/25	
Signature of Authorized Per	son M Lall	1/12	•	

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

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