

State of Rhode Island **Department of State - Business Services Division**

FILED

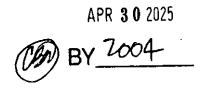
Annual Report for the year: **Limited Liability Company**

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	Exact name of the Limited Liability Company Dogpatch, LLC 4. Brief description of the character of business conducted in Rhode Island Groomer			
001710198				
3. NAICS Code 812910				
5. State of Formation				
6. Principal Office Address		City	State	Zip
2789 Post Road		Warwick	RI	02886
7. Mailing Address of Limite	d Liability Company and Name	e or Title of Contact Person		
Contact Name Jamie Nelson		Contact Title Member		
Street Address 2789 Post Road		City Warwick	State RI	^{Z_{ip}} 02886
8. The Resident Agent info	mation currently of record with	the RI Department of State is acc	urate. Changes requir	e filing Form 642
	γ, I declare and affirm that I i tatements contained herein a	have examined this report, inclu are true and correct.	ding any accompany	ying schedules and
Name of Authorized Persor Jamie Nelson		Ma	Date 4//2/25	
Signature of Authorized Pe	rson	440°-1		

MAIL TO:

Division of Business Services

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

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