



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025
Limited Liability Company

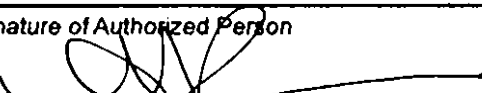
→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

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BUS SVCS DIV

2025 MAY -5 P 2:53

1. Entity ID Number 001748923		2. Exact name of the Limited Liability Company VERA MOON LLC		
3. NAICS Code 454110		4. Brief description of the character of business conducted in Rhode Island ONLINE COMMERCE: ACCESSORIES, CLOTHING, HOME GOODS		
5. State of Formation RI				
6. Principal Office Address 840 SMITHFIELD AVE, UNIT 303 LINCOLN, RI		City LINCOLN	State RI	Zip 02865
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name ALYSSIA RAMOS		Contact Title OWNER		
Street Address 840 SMITHFIELD AVE, UNIT 303		City LINCOLN	State RI	Zip 02865
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.				
Name of Authorized Person ALYSSIA MARIE RAMOS			Date 4/30/2025	
Signature of Authorized Person 				

FILED
MAY 05 2025
BY 122561

MAIL TO:

Division of Business Services

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