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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2625
Limited Liability Company

→ Filing period: February 1 - May 1

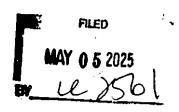
→ Filing Fee: \$50.00

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

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2025 HAY -5 P 2: 53

1. Entity ID Number OU1748923 2. Exact name of the Limited Liability Company VERA MOON LLC						
3. NAICS Code 454110 5. State of Formation	4. Brief description of the character of business conducted in Rhode Island Chine commerce: Accessories, Clothing, home goods					
6. Principal Office Address BYO SMITHFIE LINCOLN 127	LD AVE UNITSB	City LINCOLN	State LI	21p 02865		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name AUSSIA ZAMOS		Contact Title				
Street Address BYO SMITHFIELD AVE, UNIT 303		City	State P.7	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 A USSIA MARIE RAMOS Date 4/30/202				2025		
Signature of Authorized Person						



MAIL TO:

Division of Business Services

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

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

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