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State of Rhode Island

Department of State - Business Services Division

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Annual Report for the year: 2025

Limited Liability Company

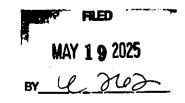
→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

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1. Entity ID Number 001698214	2. Exact name of the Limited Liability Company RAINMAN 401, LLC				
3. NAICS Code 561730	Brief description of the character of business conducted in Rhode Island LANDSCAPING .				
5. State of Formation RHODE ISLAND					
6. Principal Office Address 101 ORCHARD STREE	T	CRANSTON	State RI	^{Zip} 02910	_
7. Mailing Address of Limited Li	ability Company and Name or Title	e of Contact Person			
Contact Name MIRNA Y. CLARK		Contact Title MANAGER			
Street Address 101 ORCHA	RD STREET	City CRANSTON	State RI	^{Zip} 02910	
8 The Resident Agent informat	ion currently of record with the RI	Department of State is accura	te. Changes require	e filing Form 642.	
Under penalty of periury, I de	clare and affirm that I have examents contained herein are true	mined this report, including	any accompanyin	g schedules and	
Name of Authorized Person		Date	Date		
MIRNA Y. CLARK		02/05/2025			
Signature of Authorized Pageor Municipal Color				 _	



MAIL TO:

Division of Business Services

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

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