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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **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	2. Exact name of the Limited Liability Company				
001753532	WESTBUY LLC				
3. NAICS Gode 3. NAICS Gode 5. State of Formation RHOPE SLAND	4. Brief description of the character of business conducted in Rhode Island LOAD LOCALSTIC,				
6. Principal Office Address 182 SULTON A BAST PROVIDEN	NE ICE RI 02914	City EAST PROVIDENCE	State R1	2ip 02914	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MALCCUM K	Contact Title				
Street Address 182 SUTTON	AVE	PROVIDENCE	State R C	210001H	
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 MALCOLY)	HALL		Date 5 2	9/2025	
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