RI SOS Filing Number: 202573711310 Date: 5/28/2025 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

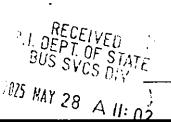
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Annual Report for the year: **Limited Liability Company**

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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



1. Entity ID Number 2. Exact name of the Limited Liability Company FRUITY FRANCHISE LLC 130935 3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island FRUIT ARRANGEMENTS 445299 5. State of Formation RI 6. Principal Office Address State Zip City 02871 PORTSMOUTH RI 92 STAGE COACH ROAD 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title DEBORAH KOSTISIN **MEMBER** State RI ^{Zip} 02879 City PORTSMOUTH Street Address 92 STAGE COACH ROAD 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

DEBORAH KOSTISIN

Signature_9

FILED

MAY 28 2025

BY 1218

MAIL TO:

Division of Business Services

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

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