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| | REC'D | |
| State of Rhode Island Department of State - Business Services Division | RIDOS 3 AM 10 | |
| imited Liability Company |) 8SD):3 7:0 8 | |

2. Exact name of the Limited Liability Company

OP. VOHON MODE 1. Entity ID Number 730615 4. Brief description of the character of business conducted in Rhode Island Gift Shop 5. State of Formation 6. Principal Office Address WOLTWICK Zip 02886 State 1060 Tollgate Road 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title State Zip 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 Signature of Authorized Person

FILED 10:39 A

JUN 03 2025

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

-> Filing period: February 1 - May 1

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

→ Filing Fee: \$50.00

Website: www.sos.ri.gov



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