



State of Rhode Island
Department of State - Business Services Division

FILED

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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BUS SYCS DIV

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1. Entity ID Number 001769937		2. Exact name of the Limited Liability Company ODS401, LLC	
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 250 ALTHEA STREET FL1		City PROVIDENCE	State RI Zip 02909
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name STEPHANIE VINAS		Contact Title MANAGER	
Street Address 250 ALTHEA STREET FL 1		City PROVIDENCE	State RI Zip 02909
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 STEPHANIE VINAS		Date 05/29/2025	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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