

State of Rhode Island

Department of State - Business Services Division

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.



1. Entity ID Number 001779552	2. Exact name of the Limited Liability Company AlphaRay, LLC			
3. NAICS Code 446120	· ·	Brief description of the character of business conducted in Rhode Island Cosmetic Marketing and Sales		
5 State of Formation RI				
6. Principal Office Address		City	State	Zip
2355 Putnam Pike		Chapachet	RI	02814
7. Mailing Address of Limite	ed Liability Company and Name of	or Title of Contact Person		
Contact Name Emile F. Martineau, Esp.		Comfact Title Resident Agent in RI		
Street Address 1260 Greenwich Avenue		City Warwick	State	^{Zip} 02886
8. The Resident Agent infor	mation currently of record with th	e RI Department of State is accu	ırate. Changes requir	e filing Form 642.
9 Under penalty of perjui statements, and that all s	y, I declare and affirm that I ha tatements contained herein are	ve examined this report, include true and correct.	ding any accompany	ring schedules and
Name of Authorized Person			Date	
Emile F. Martineau			4/14/2025	

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APR 14 2025

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MAIL TO:

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