

State of Rhode Island Department of State - Business Services Division

Annual Report for the year:

→ 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					
001742409	one main Investments UC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531390 5. State of Formation	Deal Estate Furchese, Leasing, mongling,					
R' I	Selling					
6. Principal Office Address		City	State	Zip		
1031 Planfield	1 St. Ste. 21	Jansjon	RI.	02919		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name		Contact Title				
Richard From	ll,					
Street Address		City	State	Zip		
1031 Plainfield St. Sk 2)		John Ston	III.	12917		
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	,		Date / _/			
Kepaul Frankly						
Signature of Authorized Rerson						

FILED

JUN 05 2025

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

BY APJIV