RI SOS Filing Number: 202576262440 Date: 6/24/2025 4:00:00 PM

State of Rhode Island Department of State - Business Services Division	REC'D RI
Annual Report for the year: 2025  Limited Liability Company  → Filing period: February 1 - May 1  → Filing Fee: \$50,00	100S 8SD
Penalty: Additional \$25.00 fee if form is not filed by May 31,	

Entity ID Number	2. Exect name of the Limited Lie	bility Company			
1766210	Tiger In	vectments, U			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531390		-1 l			
5. State of Formation	Keal	Extate			
RI		•			
6. Principal Office Address	~	City 0	State	Zip	
50 Jack 801	n 8t.	Woonsacket	RI	02895	
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kathy	Sayaphat	Comed Title Admin.			
Street Address 50 Jack 8	on 87.	Woon.	State 12 I	210 102895	
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	Kathy Sayap	hat	Date 6/6	24/25	
Signature of Authorized Person					

FLED

JUH 2 4 2025 WBSQB

MAIL TO:

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

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