RI SOS Filing Number: 202576557960 Date: 2/5/2025 4:00:00 PM

| Sta De | te of Rhode Island partment of State - Business Services | Division |
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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.

| PEC NUMBERS OF STATE ALAND SEE STATE |
|--------------------------------------|

| Entity ID Number | 2. Exact name of the Limited Liability Company | | | | | | |
|---|---|--------------------------------|----------|----------------------|--|--|--|
| 001712242 | 401 Baseball LLC | | | | | | |
| 3. NAICS Code | 4. Brief description of the character of business conducted in Rhode Island | | | | | | |
| 611620 | College baseball prospect events | | | | | | |
| 5. State of Formation | 7 | | | | | | |
| RI | | | | | | | |
| 6. Principal Office Address | | City | State | Zip | | | |
| 122 Touro Street | | Newport | RI | 02840 | | | |
| 7, Mailing Address of Limited L | iability Company and Name or Titl | e of Contact Person | | | | | |
| Contact Name Francis S. Holbrook | | Contact Title Registered Agent | | | | | |
| Street Address 122 Touro Street | | City Newport | State RI | ^{Zip} 02840 | | | |
| 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 | | | | |
| Francis S. Holbrook | | 2/3/25 | | | | | |
| Signature of Authorized Person | | | | | | | |

MAIL TO:

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

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

FEB 05 2025