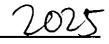
RI SOS Filing Number: 202576749680 Date: 7/9/2025 12:09:00 PM



## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: 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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1. Entity ID Number	2. Exact name of the Limited Liability Company					
001759588	RP DISTRIBUTION, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
424990						
5. State of Formation		1 1 1 .				
RI	Snack o	Vistributio	N			
6. Principal Office Address		City	State	Zip		
Ofgirmount 1	Ave Apt 1	Providence	\\2	102 906		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name  Contact Title  Contact Title  Contact Title						
Street Address / Girmwww.	t are 40t 1	Provi dence	State	30960		
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	Priguez		Date 7 9 2	15		
Signature of Authorized Person						

FILED

JUL 0 9 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