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State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2023 **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	2. Exact name of the Limited Liability Company			
001681077	SmartPay Leasing LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Rental Company			
522220				
5. State of Formation	1			
Delaware				
6. Principal Office Address		City	State	Zip
7755 Montgomery Road, Suite 500		Cincinnati	ОН	45236
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Silvia Potts		Contact Title Licensing Specialist		
Street Address 7755 Montgomery Rd., Suite 500		City Cincinnati	State OH	^{Zip} 45236
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	
Luke Williamson			5/29/2025	
Signature of Authorized Person				
Luke Williamson				
9894CE270F184C3				

FILED & JUL 2 1 2025, 1215

MAIL TO:

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

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