RI SOS Filing Number: 202577334470 Date: 7/31/2025 11:28:00 AM



State of Rhode Island Department of State - Business Services Division

RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

Annual Report for the year: 203 Limited Liability Company

-> Filing period: February 1 - May 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee it form is not filed by May 31.

7075 JUL 31 A 11: 25

| 1 Entity ID Number | 2. Exact name of the Limited Liability Company | | | |
|--|---|---------------|--------|-------|
| 1693666 | Windy Headows Landscaper LLC | | | |
| 3 NAICS Code | 4. Brief description of the character of business conducted in Rhode Island | | | |
| 561730 | Full service landscaping business | | | |
| 5 State of Formation | | | | |
| R.I. | | | | |
| 6 Principal Office Address | | City | State | Ziρ |
| 836 Maturale School House Rd. U.B | | Walefield | RI | 02879 |
| 7 Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | |
| Conlact Name | | Contact Title | | |
| Tennifer Acton CPA MEH | | CPA | | |
| Strool Address | | City | State | Zip |
| 76 Jestuson Blud Sent 201 | | Warwick | KI | W3888 |
| S. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | | |
| © 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 | |
| Themas Weyer | | | 765605 | |
| Signature of Authorized Person Jahmen | | | | |
| | | | | |

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MAIL TO:

Division of Business Services

145 W. River Street, Providence, Rhode Island 02904-2615

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