

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

REC'D RIDOS BSD S AUG 19 AM11:57:

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.

1. Entity ID Number	2. Exact name of the Limited Liability Company			
0017 02371	ZEN DEN - NEWBRT LLC			
3. NAICS Code 8 1 2 199 5. State of Formation Chade Island	4. Brief description of the character of business conducted in Rhode Island THEREUNE WILL 1:1 SERVICES IN POWERTY THEREY, CRINIOSACERE THEREMY, YOCA, FED LIGHT THE PADY, AND OTHER HOUSTIC SERVICES.			
6. Principal Office Address	DERVICE ST	City	State	Zip
42 SPRING STEET, SUITE 84		NEWPORT	FI	62640
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
JULIA M. WUNS		Contact Title  OW NER		
Street Address 20 BORDEN LANT		TIVERTON	State	<sup>zip</sup> 02878
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require fling 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 UNLIA		Date 8/19/2025		
Signature of Authorized Person	\\			′

FILED (201)
AUG 19 2025,
BY 3 H 8 X G

MAIL TO:

Division of Business Services

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

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