RI SOS Filing Number: 202578351890 Date: 9/17/2025 4:00:00 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 Company Compan				
00/675306					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531390	0 +	1 0 n	Oak M	inagersant	
5. State of Formation	'Keal t.	STATE & Pro			
6. Principal Office Address		City	State	Zip	
1200 Q.DB.M.	arhard RD	CANSTON	RI	02921	
7. Mailing Address of Limited Lis	bility Company and Name or Title	of Contact Person	<u> </u>		
Contact Name	Effall, Reeses	Contact Title Pre 5:00	V+		
Street Address	chard \$2	CRAN STU	State 12 T	62521	
	on currently of record with the RI I	Department of State is accurate	Changes requi	re filing Form 642.	
9. Under penalty of periury, I d	leclare and affirm that I have ex nents contained herein are true	amined this report, including	any accompan	ying achedules and	
Name of Authorized Person			Date	\mathcal{I}_{-}	
1 hrx			1/7	132	
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**

SEP 17 2025

BY RRIGE

FORM 632 - Revised: 12/2023