RI SOS Filing Number: 202448344720 Date: 3/12/2024 4:00:00 PM



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

FILED

Annual Report for the year: 2024 **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.

| , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | STAME |
|---|-------|
| MAR 1 2 2024 BY 530 | 17 |
| | |

| 1. Entity ID Number 001658405 | 2 Exact name of the Limited Liability Company PRINCESS AND SONS THREE, LLC | | | | |
|--|--|-----------------------------------|--------------|----------------------|--|
| 3 NAICS Code 722513 5. State of Formation RI | 4. Brief description of the cha | racter of business conducted in F | Rhode Island | | |
| 6. Principal Office Address | ess City | | State | Zip | |
| 105 PLEASANT VIEW | V AVENUE SMITHFIELD | | RI | 02917 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name JORDAN SMI | ТН | Contact Title PRESIDENT | | | |
| Street Address 105 PLEASANT VIEW AVENUE | | City SMITHFIELD | State RI | ^{Zip} 02917 | |
| 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 | | |
| JORDAN SMITH | | - 1 - 3/ | 3/4/204 | | |
| 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