



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2016 *Amended.*  
Limited Liability Company

- Filing period: September 1 - November 1  
 → Filing Fee: \$50.00  
 → Penalty: Additional \$25.00 fee if form is not filed by December 1.

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2017 MAR -3 PM 2 56

1. Entity ID Number <b>01336434</b>		2. Exact name of the Limited Liability Company <b>EF4 TRANSPORTATION, LLC</b>	
3. NAICS Code <b>48-49 TRANSPORTATION LLC</b>		4. Brief description of the character of business conducted in Rhode Island <b>TO OWN AND OPERATE A TRANSPORTATION COMPANY AND DO ALL INCIDENTAL THERETO</b>	
5. State of Formation <b>R.I.</b>			
6. Principal Office Address <b>133 FORDSON AVE APT 11</b>		City <b>CRANSTON</b>	State <b>RI</b>
		Zip <b>02910</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Luigi G. Giusti</b>		Contact Title <b>MEMBER</b>	
Street Address <b>SAME AS ABOVE</b>		City <b>CRANSTON</b>	State <b>RI</b>
		Zip <b>02910</b>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	
City	State	Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	
City	State	Zip	
Check the box to indicate an attachment <input type="checkbox"/>			
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.			
<b>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.</b>			
Name of Authorized Person <b>Luigi G. Giusti</b>		Date <b>03/03/2017</b>	
Signature of Authorized Person <i>Luigi G. Giusti</i>		SIGN DOCUMENT HERE	

FILED

MAR 03 2017

By *[Signature]*

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

March 03, 2017 02:56 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

