RI SOS Filing Number: 201750739710 Date: 9/29/2017 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

## RECEIVED R.I. DEPT. OF STATE TAMP BUS SVCS DIV

2017 SEP 29 PM 3:50 ARTON STATE

## Annual Report for the year: 2017 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.

1 Entity ID Number	2. Exact name of the Limited Liability Company				
85732	Ocean State Analytical Services, LLC				
3. NAICS Code	4 Brief description of the character of business conducted in Rhode Island				
54 - Professional, Scientific, a	radon testing				
5. State of Formation	]				
Rhode Island					
6 Principal Office Address			City	State	Zip
24 Maureen Drive			Smithfield	RI	02917
7. Mailing Address of Limited Lia		any and Name o			
Contact Name Josephine L. Saltzman			Contact Little res. / OWNER		
Street Address 24 Maureen Drive			City Smithfield	State RI	<sup>Zip</sup> <b>02917</b>
8. List ALL managers (names ar	nd addresse:	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
	1		<b>I</b>	Check the box to	ndicate an attachment
9 Resident Agent in Rhode Islan	nd This inform	nation is currently	of record with the Department of Sta	ate. Changes require filir	ng Form 642
Under penalty of perjury, I dec statements, and that all staten			• •	ng any accompanyin	g schedules and
Name of Authorized Person Date					- 207
Josephine L. Saltzman 9-15-17					
Signature of Authorized Person Josephise A	Sact	Zmrs(SIG	N DOCUMENT HERE		
7					

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040
Website: www.sos ri gov

BY\_W3/3747

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FORM 632 - Revised: 02/2017