



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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BUS SVCS DIV
2018 OCT 31 AM 9:59

Annual Report for the year: 2018

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 <u>001660786</u>		2. Exact name of the Limited Liability Company <u>H AND M Automobile and transportation L.L.C</u>			
3. NAICS Code <u>484121</u>		4. Brief description of the character of business conducted in Rhode Island <u>Helping and providing transportation for the people that needs transport to the doctor's appt and there daily activities.</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>154 Edgemere Rd</u>			City <u>Pawtucket</u>	State <u>RI</u>	Zip <u>02861</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Folorunso Ademuyi (Foley)</u>			Contact Title <u>owner</u>		
Street Address <u>154 Edgemere Rd</u>			City <u>Pawtucket</u>	State <u>RI</u>	Zip <u>02861</u>
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 ☐					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
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 <u>Folorunso Ademuyi</u>				Date <u>10/31/2018</u>	
Signature of Authorized Person <u>Ademuyi</u>					

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

OCT 31 2018
BY KONZY
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FORM 632 - Revised: 10/2017