

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2019 AUG 29 A 9: 17

Annual Report for the year: 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	15.5				
• • • • • • • • • • • • • • • • • • • •	2. Exact name of the Limited Liability Company				
1674105	KOSario's Multiservices UC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
561730	Real Estate, Property Repair, Social				
5. State of Formation					
State of Formation Services, House Work, Snow Plans work, Snow Plans					
6. Principal Office Address	Concu	Tribu	~		
71 Stenben Street			Provipencie	State	Zip
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name	Contact Title				
Street Address Cosanio			Manage / Nowen		
21 Steuben Street			[Provinsence	State	200939
o. List ALL managers (names and addresses) of the Limited Liability Company (F ARRI CARLE) DO NOT LIBERTY					
ZVAMISTO ROJANIA			Manager Name		
Street Street			Street Address		
Provisence	State	Zip 63-43 9	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
Ch			anner mares		
City	State	Zip	City	State	Zip
9. Resident Agent in Shade Island This is a Check the box to indicate an attachment					
system (in this information is currently of record with the December 1 of Co.).					
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					
Lypnisto Mosanio					
Signature of Authorized Person					
La					
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MAIL TO:

Division of Business Services

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