RI SOS Filing Number: 201929159390 Date: 12/3/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

LECRETARY OF STATE CORPORATIONS DIV

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Annual Report for the year: 2019 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				
1681076	M&M Transportation and Services LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
485310 5. State of Formation	You emergency Medical Transportation				
RHode Island					
6. Principal Office Address. My South Street Unit 3			Woo u Socket	State	zip 02895
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MATY PUSILIVE			Contact Title Co owher / Manager		
Street Address M4 SOUTH 8+3			Woodsocket	State RI	zip 02895
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name 79ATY NSTILIVE			Manager Name		
Street Address 74 SOUTH ST +3			Street Address		
city Woonsocket	State RT	zip 02895	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	۱			Date 12 - 0	3-2019
Signature of Authorized Person MATY NIIIVE					

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 C

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