Date: 3/13/2020 2:59:00 PM RI SOS Filing Number: 202036346020



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

2020 MAR 13 P 2: 49

2016 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	2. Exact name of the Limited Liability Company				
509376	Paraiso Multiservices LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
¥ 999999	Multiservice Provider including money				
5. State of Formation	wires and retail sales				
2F	wheo and recall and				
6. Principal Office Address			City	State	Zip
1080 Chalkstone Ave			Providence	RI	02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Wagaly Estrella			Contact Title Member owner		
Street Address Chalkstone Ave			Frovidence	State	^{zip} 02907
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Magaly Estrella			Manager Name		
Street Address SAME AS Above			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 Date,					 -
Magaly Estrella				3/3/20)
Signature of Authorized Person					
Magaly Fest rella					

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

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