RI SOS Filing Number: 202078352360 Date: 11/30/2020 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

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

Annual Report for the year:

2020 NOV 30 AM 11: 30

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				
20/683821 L&B clequing LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
561720 House Clequing					
5. State of Formation	14007	c ()	equiug		
ZI					
6. Principal Office Address			City	State	Zıp
10 Helm st			N. Providence	Pt	07904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Leonardo Salgrar			Contact Title		
Street Address 10 HCLM 5+			City N. Provida		Zip 02904
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	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Check the box to indicate an attachment					
9. The Resident Agent information currently of record with the RI Department of State is accurate. 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	
				11-3	0-2020.
Signature of Authorized Person					
K ta					
					

MAIL TO:

Division of Business Services

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

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

FILED C NOV 3 0 2020 BY Ou G2JWD