RI SOS Filing Number: 202080183130 Date: 12/16/2020 4:00:00 PM

State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2020
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		
001673995	C&C Transportation LLC		
3. NAICS Code: 485999	4. Brief description of the character of business conducted in Rhode Island: Non Medical Courier		
5. State of Formation: RI			
6. Principal Office Address: PO box 761	City: Pawt	State: RI	Zip: 02862
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: Calvin Bridges	Contact Title: owner		
Street Address: 72 French St	City: Pawt	State: RI	Zip: 02860
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. 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: Calvin Bridges	Date: 12-15-2020		
Signature of Authorized Person: Calvin Bridges			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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FORM 632 - Revised: 08/2020