

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

2021 MAR - 9 AM 9: 26

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 001660704		2. Exact name of the Limited Liability Company DEHART CO LLC				
3. NAICS Code 238990		Brief description of the character of business conducted in Rhode Island WELDING CONTRACTOR				
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
72 CLARA AVENUE			WARWICK	RI	02889	
7. Mailing Address of Limited	Llability Comp	any and Name o	r Title of Contact Person		<del></del>	
Contact Name JOSHUA DEHART		Contact Title OWNER	Contact Title OWNER			
Street Address 72 CLARA AVENUE		City WARWICK	State RI	Zlp 02889		
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name		Manager Name	Manager Name			
Street Address		Street Address	Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Złp	City	State	Zlp	
· <del></del>				Check the box to !	ndicate an attachment	
9. The Resident Agent inform	ation currently	of record with the	a RI Department of State is accu	rate. Changes require	e filing Form 642.	
Under penalty of perjury, I c statements, and that all sta			examined this report, including true and correct.	g any accompanyin	g schedules and	
Name of Authorized Person			Date	Date		
JOSHUA DEHART			3/8/2021			
Signature of Authorized Person	on >			•		
600	<u></u>				<u></u> .	

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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FORM 632 - Revised: 08/2020