



State of Rhode Island

Department of State - Business Services Division

FILED

Annual Report for the year: 2021

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.

SEP 03 2021

BY

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1. Entity ID Number <u>112762</u>		2. Exact name of the Limited Liability Company COMMSAN OF SOUTHERN NEW ENGLAND LLC			
3. NAICS Code 561720		4. Brief description of the character of business conducted in Rhode Island Commercial disinfection and sanitization; specifically restrooms, kitchens and virus treatment for all areas			
5. State of Formation Rhode Island					
6. Principal Office Address 205 Hallene Rd. Unit 318			City Warwick	State RI	Zip 02886
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Todd Rywolt			Contact Title President		
Street Address 4 Highview Ave			City Barrington	State RI	Zip 02806
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 --			City 2917	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 Todd Rywolt				Date 9/1/21	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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