RI SOS Filing Number: 202101030030 Date: 9/7/2021 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

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.

FILED	3
CED 07 2021	

SEP 07 2021

Entity ID Number 2. Exact name of the Limited Liability Company							
001679383	ANTHO	ANTHONY J. VALLONE LLC					
3. NAICS Code	ľ	Brief description of the character of business conducted in Rhode Island BACKGROUND INVESTIGATIONS FOR FEDERAL SECURITY CLEARANCES					
561611	BACKGR	OUND INVEST	IGATIONS FOR FEDERAL S	SECURITY CLEAF	RANCES		
5. State of Formation							
RI							
6. Principal Office Address			City	State.	Zip _		
589 ATWELLS AVE, SUITE #3H			PROVIDENCE	RI	02909		
7. Mailing Address of Limi	ited Liability Compa	iny and Name oi	Title of Contact Person	•			
Correct Name	KUOU	ne	Contact Title				
supplied Atwells ave 313			3 this Ora	Stabl	20290S		
8. List ALL managers (na	mes and addresses	s) of the Limited	Liability Company, IF APPLICAB	LE - 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	Street Address			
City	State	Zip	City	State	Zip		
	<u> </u>	I`	_	Check the box to	indicate an attachment		
9. The Resident Agent inf	ormation currently	of record with the	RI Department of State is accur	ate. Changes requi	re filing Form 642.		
Under penalty of perjury statements, and that all			examined this report, including true and correct.	any accompanyir	ng schedules and		
Name of Authorized Person	on	Date					
ANTHONY J. VALLON	E			9/	2/202/		
Signature of Authorized P		ne					

MAIL TO:

Division of Business Services

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

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