RI SOS Filing Number: 202103603430 Date: 10/18/2021 4:00:00 PM



State of Rhode Island Department of State – Business Services Division

FILED

ANNUAL REPORT FOR THE YEAR _______ 2021 _____ LIMITED LIABILITY COMPANY

OCT 18 2027

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 II) No 001709348		2. Exact name of the Limited Liability Company Harvey's Crafted Hands Mobile Detailing, LLC 4. Brief description of the character of business conducted in Rhode Island to provide mobile vehicle detailing, all ancillary purposes, and all other lawful purposes					
3. SAICS Code \$11192 5. State of Furmation	4. Brief desc						
Rhode Island							
6. Principal Office Address 210 Old Airport Roa			Chy Middletown		State RI	02842	
.7. Mailing Address of L Harvey Howard Jr.	Limited Liability Co	mpany and Name or	Title of Contact Pe	rson		-	
Street Address 210 Old Airport Road			Scran dident				
City Middletown	State RI	21p 02842	Cho	State _	7in	:	
2							
Street Address			Street Address				
City	State	Zip	City	State	Zip	<u>.</u>	
8. List ALL managers (i	names and addresses	of the Limited Liabi	lity Company. IF A	PPLICABLE - DO NOT LIST MI	EMBERS -		
Manaeer Name			Monoger Name				
Street Address			Street Address				
Cuy	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
Спу	State	Zip	City	State	Zip		
9. REGISTERED AGE	– L .NT IN RHODE ISI	' .AND	_ _	Check the box to indicate an attachment			
		·	of State. Changes	equire filing of Form 642	• . •		
Under penalty of period	I declare and affirm	that I have examined	this report includio	g any accompanying schedules ar	nd statements is	and that all statements	
contained herein are true a		that I have examined	uns report, meitum	g any accompanying seneduces at	ia statements, t	ard that an statements	

Signature of Muharized Person

09/24/2

Harvey Howard Jr.

Name of Authorized Person

MAIL TO:

Division of Business Services

148 W. River Street, Providence, RI 02904-2615

Phone: 401.222.3040 Website: www.sos.ri.gov