RI SOS Filing Number: 202104643020 Date: 11/3/2021 4:00:00 PM

(B)	State of Rhode Island Department of State - Business Services	Division
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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.

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BY	3 2021 <u>JUJ</u> OS

1. Entity ID Number 129205	2. Exact name of the Limited Liability Company SERVICEONE, LLC							
3. NAICS Code 82990- 81 2990	4. Brief description of the character of business conducted in Rhode Island MULTI-SERVICES							
5. State of Formation RHODE ISLAND								
6. Principal Office Address 1574 ELMWOOD AVENUE			City CRANSTON	State RI	Zip 02910			
7. Mailing Address of Limited Lia	bility Company	and Name or Titl	le of Contact Person					
Contact Name RAMON LANTIG	UA		Contact Title MANAGER					
Street Address 361 BLACKSTO	NE STREET		City PROVIDENCE	State RI	^{Z_{IP}} 02907			
8. List ALL managers (names ai	nd addresses) (of the Limited Lial	bility Company, IF APPLICABL	E - DO NOT LIST	MEMBERS			
Manager Name RAMON LANTIGUA			Manager Name					
Street Address 361 BLACKSTONE STREET			Street Address					
City CRANSTON	State RI	^{Zip} 02907	City	State	Zip			
Manager Name			Manager Name					
Street Address	.		Street Address					
City	State	Zip	City	State	Zip			
	1		<u> </u>	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	Date	Date						
1 Kamon La			08/11/2021					
Signature of Averorized Person								

MAIL TO:

Division of Business Services

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

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