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Annual Report for the year: 2022 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	2. Exact nam	e of the Limited Li	ability Company		
148219	2. Exact name of the Limited Liability Company MN DESIGN LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
54/330					
5. State of Formation	ENGINEERING				
RI.					
6. Principal Office Address			City	T _S	<u> </u>
41 BROOKSIDE Dr.			CRANSTON	State P_7	Zip 02910
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MANOCHEHR NORPARVAR Street Address			Contact Title PRESIDENT		
41 BROOKSIDE Dr.			CRANSTAN	State	Zip 02910
e. E.S. REE managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
Manager Name	<u> </u>			Gia le	Σip
			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. The Resident Asset of control of the box to indicate an attachment					
The Resident Agent Information currently of record with the RI Department of State is accurate. Changes and the RI Department of State is accurate.					
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					
MANOCHEHR NORPARVAR MAY 22 222					
Signature of Authorized Person					
Vilarotall Comm					

MAIL TO:

Division of Business Services

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

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

MAY 27 2022 BY 1675

8 1 | FORM 632 - Revised: 08/2020