

R.I. DEPTIOE STATE BUS SVCS DIV

2023 JAN -9 PM 2: 53

Annual Report for the year: 2023
Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1, Entity ID Number	2. Exact name of the Limited Liability Company			
001658677	DeGiulio Insurance Group LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
5 24210	Insurance Agency			
5. State of Formation	1 - Michine Ager	14		
RI		_		
6. Principal Office Address		City	State	Zip
3590 W. Shore Rd.		Warwick	RI	02886
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Gerald Debjulio		Contact Title President		
Street Address 3590 W. Shore Pd.		city Waruick	State PII	Zip 02886
8. 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	100.	_	Date	
Genald Dobiulso 1/5/2023				
Signature of Authorized Person				
				12:00 177

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

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