Annual Report for the y Limited Liability Comp		•		1
→ Filing period: February 1 → Filing Fee: \$50.00	for 21	RECEIVED R.I. DEPT. OF ST, BUS SVCS DI		
→ Penalty: Additional \$25.0	u ree it form is not filed by N	nay 51.		
1. Entity ID Number	2. Exact name of the Limit	ed Liability Company	2023 JAN 19 PM 1	
00849606	Patriot EQU	ripment kon	talo 0-0	
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
532412	EQuip. rental			
5. State of Formation	·			
6. Principal Office Address		City	State	Zip
321 Spring St.		B.J.	lS∵ l	02807
Mailing Address of Limited Li	iability Company and Name o	or Title of Contact Perso	n	
Contact Name Bobby Henry	ney	Contact Title	·	
Street Address PO Box 1723		city B.\.	State 2.	Zip 02807
8. The Resident Agent informal	tion currently of record with th	ne RI Department of Sta	te is accurate. Changes re	
Under penalty of perjury, I de statements, and that all state	eclare and affirm that I have	examined this report,		
Name of Authorized Person Robert Henney			Date \	15/23
Signature of Authorized Persor	n '			

RISOS Filing Number: 202326252330 Date: 1/19/2023 1:53:00 PM

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

JAN 1 9 2023

FORM 632 - Revised: 11/2021