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State of Rhode Island

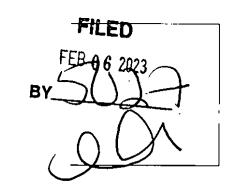
Department of State - Business Services Division

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.



Signature of Authorized Person					
CHRISTINE MONAHAN			1/26/2023		
Name of Authorized Person			Date		
Under penalty of perjury, I dec statements, and that all statem	lare and affirm that I have ents contained herein are	examined this report, including true and correct.	any accompanyin	g schedules and	
8. The Resident Agent information	in currently of record with th	e RI Department of State is accura	ite. Changes requir	e filing Form 642.	
Street Address 200 MIDWAY RD SUITE 172		City CRANSTON	State RI	^{Zip} 02920	
Contact Name CHRISTINE MONAHAN		Contact Title OPERTING MANAGER			
7. Mailing Address of Limited Lia				<u></u>	
200 MIDWAY RD SUITE 172		CRANSTON	RI	02920	
6. Principal Office Address		City	State	Zip	
5. State of Formation RI					
3. MATCS Code 1110	Brief description of the character of business conducted in Rhode Island ATTORNEY AT LAW				
001688647	2. Exact name of the Limited Liability Company CMONAHAN LAW, LLC				
Entity ID Number	2. Exact name of the Limit	ed Liability Company			

MAIL TO:

Division of Business Services

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

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