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State of Rhode Island

Department of State - Business Services Division

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Annual Report for the year: 2017

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.

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2023 FEB 13 A 10: 19

1. Entity ID Number 000582954	2. Exact name of the Limited Liability Company RETLEV CONSULTING LLC			
3. NAICS Code 541613	Brief description of the character of business conducted in Rhode Island SPECIALTY RESTAURANT CONSULTING			
5. State of Formation RI				
6. Principal Office Address 2 THOMAS ST		City PROVIDENCE	State RI	Zip 02903
7. Mailing Address of Limited Lie	ability Company and Name or T	itle of Contact Person		
Contact Name JENS RETLEV		Contact Title MEMBER		
Street Address 70 AARON AVE		City BRISTOL	State RI	^{Zip} 02809
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 JENS RETLEV		Date 2/10/23		
Signature of Authorized Person				

FILED

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BY CHSSP

MAIL TO:

Division of Business Services

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

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