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Department of State - Business Services Division

2023

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2023 FEB 15 P 1: 32

→ 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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1. Entity ID Number	2. Exact name of the Limited Liability Company		
1731219	I sand 1	louse Ba	(& G (!/
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island		
700511	Racal	0 .11	_
5. State of Formation	ou and	8(11)	XCC! BEAN
RI	Ser and and Se-	Scill Co	•
6. Principal Office Address	<u> </u>	City	State Zip
32 struce st		1-200; dence	KI 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name \ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Contact Title	
Street Address Leghe D	Hopkins	CIPROU, CRUCO	State (- Zip 029) 4
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		Date 2-15-23	
Signature of Authorized Person			

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MAIL TO:

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

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