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State of Rhode Island

Department of State - Business Services Division

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Annual Report for the year: ___

2019

2023 MAR - 9 PM 1: 32

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			
000698561	OLINKA MARINE MANAGEMENT, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
483112	MARINE VESSEL OWNERSHIP AND OPERATION			
5. State of Formation				·
RHODE ISLAND				
6. Principal Office Address		City	State	Zip
56 KENT STREET		SCITUATE	MA	02066
7. Mailing Address of Limited	Liability Company and Name	e or Title of Contact Person		
Contact Name AMR MOHMED FAWZY ABDELRAZEK		Contact Title LLC MANAGER AND SOLE MEMBER		
Street Address 56 KENT STREET		City SCITUATE	State MA	Zip 02066
8. The Resident Agent informa	ation currently of record with	the RI Department of State is accura	te. Changes requi	re filing Form 642.
Under penalty of perjury, I d statements, and that all stat	leclare and affirm that I ha ements contained herein	ve examined this report, including a are true and correct.	any accompanyli	ng schedules and
Name of Authorized Person			Date	
AMR MOHMED FAWZY	ABDELRAZEK	·	FEBRUARY 10, 2023	
Signature of Authorized Perso	Ry 1			
1 chm	1 3 Jan -			
	101			

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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