

→ 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 MAR 28 A 11: 58

1. Entity ID Number	2. Exact name of the Limited Liability Company				
001728297	IFID Tryching LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island  Transportation Company, having general				
423110					
5. State of Formation	preights.	O		,	]
R.I					
6. Principal Office Address	· · · · · ·	City C	State	Zip	~
16 Yenn St.,		Providence	K.1.	029	p9
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Meanamndi Jam Contact Title O'Wner					
Street Address & Penn &		city providence	State . 1	Zip OI	909
8. The Resident Agent information currently of record with the Rt 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	meanamndi	Sam.	Date 03	28	23
Signature of Authorized Person					

MAR 28 2023 BY FU356

MAIL TO:

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

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