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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.

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Entity ID Number	2. Exact name of the Limited Liability Company					
001694143	SAFETY MANAGEMENT SOLUTIONS, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
541690	SECURITY MANAGEMENT AND CONSULTING SERVICES					
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zip		
1 TURKS EMAD PL. #120	<u>0</u>	PROVIDENCE	RI	02903		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name ANTHONY MANERED I		Contact Title MEMBER				
Street Address 1 TURKS SEAD PL. #1200		City PROVIDENCE	State RI	Zip 02903		
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	Date		
ANTHONY MANFREDI			3/17/23	3/17/23		
Signature of Authorized Person						
Cutrea Malando						

MAIL TO:

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

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