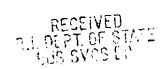


Department of State - Business Services Division

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.



2023 APR -7 A 10: 08

1. Entity ID Number	2. Exact name of the Limited Liability Company			
001668534	DETAILED DESTINATIONS, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
561510	Travel agency			
5. State of Formation	7			
RI				
6. Principal Office Address		City	State	Zip
11 Waterman Avenue		North Providence	RI	02911
7. Mailing Address of Limited I	iability Company and Name or	Title of Contact Person		.
Contact Name Jamie Perotti		Contact Title		
Street Address 11 Waterman Avenue		City North Providence	State RI	^{Zip} 02911
8. The Resident Agent informa	ition currently of record with the	RI Department of State is accurate.	Changes require	e filing Form 642.
	eclare and affirm that I have ex ements contained herein are t	kamined this report, including any rue and correct.	accompanyin	g schedules and
Name of Authorized Person			Date	
Jamie Perotti			3-31-23	
Signature of Authorized Perso	n ()		_ -	
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APR 07 2023

MAIL TO:

Division of Business Services

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

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