



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

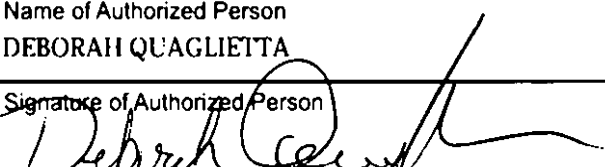
→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED
STAMP

APR 14 2023

BY

1. Entity ID Number 001704035		2. Exact name of the Limited Liability Company DQ INSURANCE LLC	
3. NAICS Code 524210		4. Brief description of the character of business conducted in Rhode Island INSURANCE BROKER FOR MEDICARE, DISABILITY, LIFE, ETC.	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 75 INDEPENDENCE WAY APT 10414		City CRANSTON	State RI
		Zip 02921	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name DEBORAH QUAGLIETTA		Contact Title OWNER	
Street Address 75 INDEPENDENCE WAY APT 10414		City CRANSTON	State RI
		Zip 02921	
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 DEBORAH QUAGLIETTA		Date 4/13/2023	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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