



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.

RECEIVED STAMP  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV.  
 2023 APR 19 P 12:50

1. Entity ID Number 001722157	2. Exact name of the Limited Liability Company GRAHAM EXPRESS LLC		
3. NAICS Code 485310	4. Brief description of the character of business conducted in Rhode Island NON EMERGENCY TRANSPORT		
5. State of Formation RI			
6. Principal Office Address 31 DIAMOND STREET	City PROVIDENCE	State RI	Zip 02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name PATRICIA GRAHAM		Contact Title OWNER	
Street Address 31 DIAMOND STREET	City PROVIDENCE	State RI	Zip 02907
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
<i>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.</i>			
Name of Authorized Person PATRICIA GRAHAM		Date 04/17/2023	
Signature of Authorized Person 			

**FILED**  
 APR 19 2023  
 BY NSUEF  
 A.A.

**MAIL TO:**  
 Division of Business Services  
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