RI SOS Filing Number: 202335810240 Date: 5/18/2023 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

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BUS SYCS DIV

2023 MAY 18 P 3: 27

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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1. Entity ID Number	2. Exact name of the Limited Liability Company			
1339545	HARMODY TRANSFORT SERVICE LIC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
486320	DON EMERGENCI MEDICAL			
5. State of Formation	TRANSPORTATION			
6. Principal Office Address		City	State	Zip
32 RIVERVIED DR		Lun BERLON	124	07864
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title DODER		
Street Address 5.7 RIVERUEAN DOZ		CUM SECLADO	State	202864
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 . or	100	
LAWRENCE TEMING - ANDALCO 5/18/23				
Signature of Authorized Person Lawrence A				

FILED

MAY 1 8 2023 BY ML PIPHE

MAIL TO:

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

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