Office of the Secretary of State Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 Limited Liability Company Annual Report Filing Period. February 1 - May 1 In accordance with R.I.G.L. 7-16-66(b.d.) each limited liability company failing or rotising to file is annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b.S.C.)) is subject to a penalty fee of \$25.00. ANNUAL REPORT YEAR - ENTER THE CURRENT FILING YEAR 2023: 2023 1. ID No. 001674275 2. Exact Name of the Limited Liability Company Grand Moving Company, LLC 3. State of Formation State: RI ARTICLE II Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 484210 ARTICLE III MOVING COMPANY 5. Principal Office Address No. and Street: 285 PARK AVENUE UNIT 4 Contact Title: No. CRANSTON <th></th> <th>State of Rhode Island</th> <th>Fee: \$50.00</th>		State of Rhode Island	Fee: \$50.00
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	No. and Street: <u>ADLER POLL</u> <u>ONE CITIZEN</u>	S PLAZA, 9TH FLOOR	
City or Town: <u>PROVIDENCE</u> State: <u>RI</u> Zip: <u>02903</u> Country: <u>USA</u>	City or Town: <u>PROVIDENCE</u>	State: <u>RI</u> Zip: <u>0</u>	2903 Country: USA

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

SUSAN LEACH DEBLASIO, ESQ. 1 CITIZENS PLAZA, 8TH PLAZA PROVIDENCE , RI 02903

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 24 Day of May, 2023 at 11:46:36 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By SUSAN LEACH DEBLASIO, ESQUIRE

Signature of Authorized Person

Form No. 632 Revised 09/07

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