



State of Rhode Island  
Department of State - Business Services Division

**STAMP**

Annual Report for the year: 2022  
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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BUS SVCS DIV  
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2023 SEP 13 P 12:51

1. Entity ID Number 001711299		2. Exact name of the Limited Liability Company NERY DAYCARE LLC	
3. NAICS Code 624410		4. Brief description of the character of business conducted in Rhode Island DAY CARE CENTER	
5. State of Formation RI			
6. Principal Office Address 1282 MENDON RD, UNIT 1		City CUMBERLAND	State RI
		Zip 02864	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name MERY K MALDONADO POLANCO		Contact Title MANAGER	
Street Address 1282 MENDON RD		City CUMBERLAND	State RI
		Zip 02864	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 MERY K MALDONADO POLANCO			Date 9/13/23
Signature of Authorized Person 			

FILED 1253  
SEP 13 2023  
BY SNWYS

**MAIL TO:**  
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