



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2021
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
2023 SEP 15 P 3:07

1. Entity ID Number 000146890		2. Exact name of the Limited Liability Company Boulder Claims, LLC	
3. NAICS Code 524126		4. Brief description of the character of business conducted in Rhode Island ALL LAWFUL PURPOSES, INCLUDING, BUT NOT LIMITED TO, CLAIMS ADMINISTRATION SERVICES FOR PROPERTY AND CASUALTY INSURERS.	
5. State of Formation DE			
6. Principal Office Address 1166 Avenue of the Americas		City New York	State NY
Zip 10036			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Marina Soroker		Contact Title Specialist - Tax Operations	
Street Address 1166 Avenue of the Americas		City New York	State NY
Zip 10036			
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 Claudric Adams		Date 06/01/2023	
Signature of Authorized Person <i>Claudric E. Adams</i>			

FILED

SEP 15 2023

3:08pm

BY LKS FP025

MAIL TO:

Division of Business Services
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