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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.

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2023 OCT 16 A H: 57

1. Entity ID Number 001683861	2. Exact name of the Limited Liability Company CCSRI, LLC			
3. NAICS Code 518210 5 State of Formation DE	Brief description of the character of business conducted in Rhode Island Data Processing, Hosting, and Related Services			
6. Principal Office Address	• · · · · · · · · · · · · · · · · · · ·	City	State	Zip
4321 Collington Road		Bowie	MD	20716
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Beverly Allen		Contact Title Secretary		
Street Address 4321 Collington Road		City Bowie	State MD	^{Zip} 20716
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	, <u> </u>		Date	
Beverly Allen			9/27/2023	
Signature of Authorized Person				quant see,

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 1 6 2023
BY 29651