

State of Rhode Island

Department of State - Business Services Division

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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|--|---|--|---------------------------------------|---------------------|--|
| 1. Entity ID Number | 2. Exact name of the Limited Liability Company | | | | |
| 924 46 | Southwire Company, LLC | | | | |
| 3. NAICS Code | (4_Brief description of the character of business conducted in Rhode Island | | | | |
| 331400 | Sales of manufactured wire and cable and accessories | | | | |
| 5. State of Formation | | | | | |
| Delaware | | | | | |
| 6. Principal Office Address | <u>.</u> | City | State | Zip | |
| One Southwire Drive | | Carrollton | GA | 30119 | |
| 7.4Mailing Address of Limited L | iability Company and Name or Tit | le of Contact Person | · · · · · · · · · · · · · · · · · · · | | |
| Contact Name | | Contact Title | | | |
| Tracy Ford | | Director, Tax | | | |
| Street Address | | City | State | Zip | |
| One Southwire Drive | | Carrollton | GA | 30119 | |
| 8. The Resident Agent informa | tion currently of record with the RI | Department of State is acc | curate. Changes requi | re filing Form 642. | |
| 9. Under penalty of perjury, i statements, and that all state | declare and affirm that I have e ements contained herein are tru | xamined this report, inclue and correct. | iding any accompan | ying schedules and | |
| Name of Authorized Person | | | (Date | Date | |
| Jonathan Neal | | | 09/06/2023 | | |
| Signature of Authorized Perso | n) | | • | | |
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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