

State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: Limited Liability Company

1015

RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2023 DEC 21 P 2: 18

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1. Entity ID Number	2. Exact name of the Limited Liability Company			
001699430	SS Transport, LCC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
481112	Transportusions freight			
5. State of Formation	vans pourans			
RI				
6. Principal Office Address		City	State	Zip
98 Benefair ST		Particles,	RI	02861
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Samuel Semedo		OWNER  City State Zip  Ramsuccet BT 02861		
Ctroot Addroop		City	State	Zip
98 Benefait ST		Ramiveleel	BI	02861
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			Date	
Smuel semedo			1a-21-23	
Signature of Authorized Fjerson				
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FILED

DEC 21 2023 BY 3GFTS

MAIL TO:

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

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