

## State of Rhode Island

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

Annual Report for the year: **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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2024 JAN 11 A 10: 13

1. Entity ID Number 000869967	Exact name of the Limited Liability Company     James Nowakowski LLC      Brief description of the character of business conducted in Rhode Island     Carpentry work for resale to builders				
3. NAICS Code 236118					
5. State of Formation CT	7				
6. Principal Office Address	<del></del>	City	State	Zip	
56 Ridgewood Rd		Mystic	СТ	06355	
7. Mailing Address of Limited L	iability Company and Name o	r Title of Contact Person	<del></del>		
Contact Name James Nowakowski		Contact Title Sole LLC Mbr			
Street Address 56 Ridgewood Dr		City Mystic	State CŤ	<sup>Zip</sup> 06355	
8. The Resident Agent information	tion currently of record with the	e RI Department of State is ac	curate. Changes require	e filing Form 642.	
9. Under penalty of perjury, I statements, and that all state	declare and affirm that I have	ve examined this report, incl	uding any accompany	ing schedules and	
Name of Authorized Person			Date	Date	
Tricia Fiore			12/29/202	12/29/2023	
Signature of Authorized Person	1	<del></del>			
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MAIL TO:

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

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