

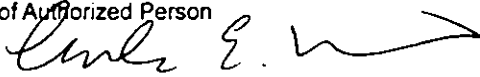


State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: **2024**  
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.

**FILED**  
**JAN 16 2024**  
BY **32004**  
**DS**

1. Entity ID Number <b>00112521</b>		2. Exact name of the Limited Liability Company <b>Trans-Link, LLC</b>	
3. NAICS Code <b>488510</b>		4. Brief description of the character of business conducted in Rhode Island <b>ARRANGING TRANSPORTATION FOR GOODS</b>	
5. State of Formation <b>Rhode Island</b>		TITLE: 7-16	
6. Principal Office Address <b>875 Oaklawn Avenue, Suite 306</b>		City <b>Cranston</b>	State <b>RI</b>
		Zip <b>02920</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Carla E. Manni</b>		Contact Title <b>President</b>	
Street Address <b>875 Oaklawn Avenue, Suite 306</b>		City <b>Cranston</b>	State <b>RI</b>
		Zip <b>02920</b>	
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 <b>Carla E. Manni</b>			Date <b>1/2/2024</b>
Signature of Authorized Person 			

## MAIL TO:

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