

## 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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| 1. Entity ID Number 001681608                                                                                                                                                                           | 2. Exact name of the Limited Liability Company  Daniel S. Wurzbacher LLC    |                                    |          |                      |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|------------------------------------|----------|----------------------|--|
| 001001000                                                                                                                                                                                               | Daniel 3. Wuizbacher LLC                                                    |                                    |          |                      |  |
| 3. NAICS Code                                                                                                                                                                                           | 4. Brief description of the character of business conducted in Rhode Island |                                    |          |                      |  |
| 441222                                                                                                                                                                                                  | Boat sales                                                                  |                                    |          |                      |  |
| 5. State of Formation                                                                                                                                                                                   |                                                                             |                                    |          |                      |  |
| RI                                                                                                                                                                                                      |                                                                             |                                    |          |                      |  |
| 6. Principal Office Address                                                                                                                                                                             | City                                                                        |                                    | State    | Zip                  |  |
| 107 Garboard Street                                                                                                                                                                                     | Jamestown                                                                   |                                    | RI       | 02835                |  |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person                                                                                                                     |                                                                             |                                    |          |                      |  |
| Contact Name Daniel S. Wurzbacher                                                                                                                                                                       |                                                                             | Contact Title Sole Managing Member |          |                      |  |
| Street Address 107 Garboard Street                                                                                                                                                                      |                                                                             | City Jamestown                     | State RI | <sup>Zip</sup> 02835 |  |
| 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     |                      |  |
| Daniel S. Wurzbacher                                                                                                                                                                                    |                                                                             | Jan 16 2024                        |          |                      |  |
| Signature of Authorized Person DocuSigned by:                                                                                                                                                           |                                                                             |                                    |          |                      |  |
| David Wursbacker  O1E3A9F0EBA8410                                                                                                                                                                       |                                                                             |                                    |          |                      |  |

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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 BY 299ES

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