RI SOS Filing Number: 202444576080 Date: 1/23/2024 4:00:00 PM

·	*******	
State of Rhode Island Department of State - Business Services Division	FILED	
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.	JAN 23 2024	

1. Entity ID Number	2. Exact name of the Limited Lia	bility Company i			
001668254	Atlantic Res	toration E Remo	deling	Group, UC	
3. NAICS Code	Brief description of the character of business conducted in Rhode Island:				
236118	Restoration and remodeling of projecties damaged by water, fire, wind				
5. State of Formation	] projecties damaged by water, the, will				
CT	mold, seurge, asbestas				
6 Principal Office Address		City	State	Zip	
411 John Daune	1 Drive	New Britain	CT	0.051	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Namer Christina M. Poke Contact Title V.P. Admin					
Street Address The Muni	ey Drive	WewBntain	State	200051	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642					
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	0 0 1	-	Date	12024	
Gregon ?	S. Radin		1 1/4	1000	
Signature of Aylberized Person					

Phone: (401) 222-3040