			•	T AT A
		of Rhode Isla ne Secretary		Fee: \$50.00
		Of Business Se		
	-	W. River Stree		
1426		ence RI 02904-	2615	
1030	(4	.01) 222-3040		
Limited Liability Company				
Annual Report Filing Period: February 1 -	May 1			
T ming Feriou. Tebruary T-	viay i			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or				
refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024 : <u>2024</u>				
1. ID No. 001335207				
2. Exact Name of the Limited Liability Company \underline{MKF} ASSOCIATES LLC				
3. State of Formation				
State: Pl				
State: <u>RI</u>				
	NA	ICS CODE		
Enter the air divit NALCO Code that best describes the primery business conducted by the active				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.				
<u>541214</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
AN ESTABLISHMENT THAT IS ENGAGED IN PAYROLL SERVICES AND TAX FILINGS.				
5. Principal Office Addre	SS			
No. and Street: 164	AIRPORT RD			
<u>104</u>	RWICK	State: <u>RI</u>	Zip: <u>02889</u>	Country: <u>USA</u>
	<u>KWICK</u>	5tate. <u>Ki</u>	Zip. <u>02007</u>	<u>country: <u>05/1</u></u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact	Title:			
	AIRPORT RD	-		
City or Town: WA	RWICK	State: <u>RI</u>	Zip: <u>02889</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
MICHAEL FERREIRA, EA 164 AIRPORT RD WARWICK , RI 02889				
WIGHALL FERREIRA, EA 104 AIRFORT RD WARWICK , RI 02009				

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 25 Day of January, 2024 at 2:54:53 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MICHAEL FERREIRA

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved