		f Rhode Island Secretary of		Fee: \$50.00
		f Business Servi		
		V. River Street	ices	
		ce RI 02904-261	15	
1636		1) 222-3040		
Limited Liabilit				
Annual Report				
Filing Period: Fel				
In accordance wi	th R.I.G.L. 7-16-66(d), each limit	ed liability comp	anv failing or	
	annual report within thirty (30) o			у
law (R.I.G.L. 7-16	5-66(b&c)) is subject to a penalty	fee of \$25.00.		
ANNUAL REPOR	RT YEAR - ENTER THE CURREN	T YEAR <b>2024</b> .	2024	
1. ID No. <u>00</u>	1696886			
2. Exact Name	of the Limited Liability Compan	<b>y</b> <u>Tyler Capital,</u>	LLC	
3. State of Form	nation			
State: <u>RI</u>				
	NAIC	CS CODE		
-	it NAICS Code that best describe at of codes <u>here.</u> More informatic			• •
<u>522292</u>				
4. Brief Descrip Island	tion of the Character of the Bus	iness Which is <i>i</i>	Actually Condu	icted in Rhode
PRIVATE EQU	ITY AND FUNDING SERVIC	ES		
PRIVATE EQU 5. Principal Offi		ES		
		<u>ES</u>		
5. Principal Offi	ice Address	<u>ES</u>		
5. Principal Offi	ice Address 51 JEFFERSON BLVD.	E <u>S</u> State: <u>RI</u>	Zip: <u>02888</u>	Country: <u>USA</u>
5. Principal Offi No. and Street: City or Town:	ice Address <u>51 JEFFERSON BLVD.</u> <u>2ND FLOOR</u>	State: <u>RI</u>		
<ul> <li>5. Principal Offi</li> <li>No. and Street:</li> <li>City or Town:</li> <li>6. Mailing Addreet</li> </ul>	ice Address <u>51 JEFFERSON BLVD.</u> <u>2ND FLOOR</u> <u>WARWICK</u> ess of Limited Liability Company	State: <u>RI</u> y and Name or T		
<ul> <li>5. Principal Offi</li> <li>No. and Street:</li> <li>City or Town:</li> <li>6. Mailing Addreet</li> </ul>	ice Address 51 JEFFERSON BLVD. 2ND FLOOR WARWICK	State: <u>RI</u> y and Name or T		
<ul> <li>5. Principal Offi</li> <li>No. and Street:</li> <li>City or Town:</li> <li>6. Mailing Addreet</li> <li>Contact Name:</li> </ul>	ice Address <u>51 JEFFERSON BLVD.</u> <u>2ND FLOOR</u> <u>WARWICK</u> ess of Limited Liability Company <u>JULIE TOMASSI</u> Contact Title:	State: <u>RI</u> y and Name or T		

## 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JARED M. TOMASSI, ESQ. 51 JEFFERSON BLVD. 2ND FLOOR WARWICK , RI 02888

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

**Signed this 5 Day of February, 2024 at 2:21:08 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 JULIE TOMASSI

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved