RI SOS Filing Number: 202445594650 Date: 2/5/2024 4:00:00 PM



## State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 20 **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	2. Exact name of the Limited Liability Company			
001338120	LAO xtreme Variety and Transportation 4			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
485999	MON Emmergency Transportation Services			
5. State of Formation				
RI				
6. Principal Office Address		City	State	Zip
34 Bridgha	m street	Providence	RI	02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Omobola?	Saloy	Owner		
Street Address 34 Bridging	xm 57	Provident	State R	210 0290]
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	<u> </u>	<u></u>	Date	
Placiomo	Salow		2-5-	2024
Signature of Authorized Person				

FEB - 5 2024

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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