RI SOS Filing Number: 202446320320 Date: 2/7/2024 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Zu 24

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.

REC'D RIDOS BSD 724 FEB 7 PM 12:30:01	

Entity ID Number	2. Exact name of the Limited Lial	bility Company		, .	
272-559	Keople	5 Constu	CTION	LLC	
3. NAICS Code	4. Brief description of the charact	ter of business conducted in Rhoo	le Island		
236118	ſ		1	4	
5. State of Formation	locher	al Cont	vact	\sim	
PI	V				
6. Principal Office Address	•	City O	State	Zip	
42 SNIV	enoral	Paut	RI	02860	
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person			
Contact Name		Contact Title			
Kerin Phoenix		mel			
Street Address 42 CUSYENN AVE		City for t	State	21p 028 60	
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	Phoenix		Date	124	
Signature of Authorized Person	<i></i>		/ /	/	
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FILED

FEB 7 2024

BY 99562

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov