

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2021

→ 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. Ex	2. Exact name of the Limited Liability Company				
001711392	LIARA TRANSPORTATION LLC				
3. NAICS Code 4. Bi	4. Brief description of the character of business conducted in Rhode Island				
5. State of Formation	Transportation				
6. Principal Office Address		City	State	Zip	
17WVAt+ 9	+	PROU.	KT.	02905	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contect Name	Contact Title				
Juan 4.	ACPJEdo				
Street Address		City	State	Zip	
17 WYB ++	5 T	PROVIDE NCP	1969	02908	
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	•		Date		
JUAN C. ACOJE do		2-12-24			
Signature of Authorized Person					
Juan C. Bloom					

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MAIL TO:

Division of Business Services

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