



State of Rhode Island  
Department of State - Business Services Division

REC'D RIDOS BSD  
24 FEB 15 AM 8:38:42

Annual Report for the year:  
Limited Liability Company

2024

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

|   |  |   |               |
|---|--|---|---------------|
| 1. Entity ID Number<br>001335291  |  | 2. Exact name of the Limited Liability Company<br>SOBO EXPRESS, LLC                           |               |
| 3. NAICS Code<br>484121   |  | 4. Brief description of the character of business conducted in Rhode Island<br>TRANSPORTATION |               |
| 5. State of Formation<br>R.I.   |  |   |               |
| 6. Principal Office Address<br>1455 MINERAL SPRING AVE #2   |  | City<br>N. PROVIDENCE   | State<br>R-I. |
|   |  | Zip<br>02907  |               |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |   |               |
| Contact Name<br>ALABA A. SOBOWALE   |  | Contact Title<br>OWNER  |               |
| Street Address<br>P.O. BOX 5571   |  | City<br>PROVIDENCE  | State<br>R-I. |
|   |  | Zip<br>02862  |               |
| 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<br>ALABA A. SOBOWALE  |  | Date<br>02-15-24  |               |
| Signature of Authorized Person<br>A. A. SOBOWALE  |  |   |               |

m3 FILED 839

FEB 15 2024

BY BRQAM

MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov