RI SOS Filing Number: 202446842110 Date: 2/20/2024 9:34:00 AM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:
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 24 FEB 20 AM9:30:50	

1. Entity ID Number	2. Exact name of the Limited Liability Company						
1697614	Grafelinda Restaurant RI (10						
3. NAICS Code	4. Brief description of the character of business copducted in Rhode Island						
77 2571	4. Brief description of the character of business conducted in Rhode Island Latin American pustawant proparty Jupantic Som American Cuisin						
5. State of Formation	Laminon						
5. State of Formation	IC. un anvilan aisin						
IC1	2000						
6. Principal Office Address		City	State	Zip			
553 Horter	+ Aue	Proces	VCI	02909			
7. Mailing Address of Limited Lia	7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name		Contact Title					
Mana Dia	a }	aures					
Street Address		City	State	Zhp			
75 Independence way 30-312		Cronston	\C_T_	0296			
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 /				
Mikne Dias	₹		02/2	0/24			
Signature of Authorized Person							
CHILADO							

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FEB 20 2024 BY APKY 3

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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