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## State of Rhode IslandDepartment of State - Business Services Division

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
000740612	Armenucci, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
722511	To own and operate restaurants and do all things incidental thereto.				
5. State of Formation					
RI			_		
6. Principal Office Address		City	State	Zip	
280 George Washington Highway		Smithfield	RI	02917	
7. Mailing Address of Limite	d Liability Company and Name or T	tle of Contact Person			
Contact Name Jeanine lannucci		Contact Title  Member			
Street Address 280 George Washington Highway		City Smithfield	State RI	<sup>Zip</sup> 02917	
	mation currently of record with the F				
9. Under penalty of perjur statements, and that all s	y, I declare and affirm that I have tatements contained herein are tr	examined this report, include and correct.	ding any accompany	ying schedules and	
Name of Authorized Person			Date	Date	
Jeanine lannucci		2/14/24			
Signature of Authorized Per	Muer				

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

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