RI SOS Filing Number: 202447596120 Date: 2/28/2024 4:00:00 PM



State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2024 **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.

1 Entity ID Number 001743843	2 Exact name of the Limited Yapa LLC	2 Exact name of the Limited Liability Company Yapa LLC 4. Brief description of the character of business conducted in Rhode Island Own and operate a food truck business and/or food service business			
3 NAICS Code 722320					
5 State of Formation					
6 Principal Office Address	1	City	State	Zip	
39 Rhode Island Avenue, Apt. 3		Newport	RI	02840	
7 Mailing Address of Limit	ed Liability Company and Name or T	Title of Contact Person		-	
Contact Name Tarci-Lee Galarza		Contact Title Member			
Street Address 39 Rhode Island Avenue, Apt. 3		City Newport	State RI	^{Zip} 02840	
8 The Resident Agent info	rmation currently of record with the	RI Department of State is acc	urate. Changes requi	re filing Form 642	
	ry, I declare and affirm that I have statements contained herein are t	-	ding any accompan	ying schedules and	
Name of Authorized Person			Date		
Tarci-Lee Galarza			2/19/24		

MAIL TO:

Division of Business Services

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

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