

State of Rhode Island

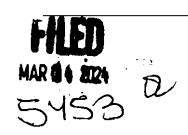
Department of State - Business Services Division

u•	2024
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.



Entity ID Number	2. Exact name of the Limited Liability Company					
000794186	Cores Unlimited LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
424110	Buying and selling					
5. State of Formation						
Rhode Island						
6. Principal Office Address	·	City	State	Zip		
840 North Wilson Road		Lowgap	NC	27024		
7. Mailing Address of Limited Lia	7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Phillip Harrison		Contact Title President				
Street Address 840 North Wilson Road		^{City} Lowgap	State NC	^{Zip} 27024		
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 Perspn Date / /						
x Philly Hom	300	·	2/29/	24		
Signature of Authorized Person	· ·			,		

MAIL TO:

Division of Business Services

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

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