

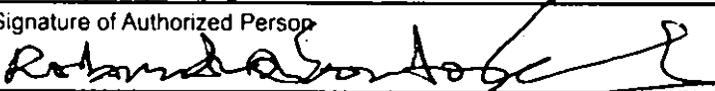


State of Rhode Island
Department of State - Business Services Division

REC'D RI SOS BSD
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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 000822276		2. Exact name of the Limited Liability Company MULTILANGUAGE & SERVICES, LLC		
3. NAICS Code 541930		4. Brief description of the character of business conducted in Rhode Island INTERPRETING & TRANSLATION		
5. State of Formation RHODE ISLAND				
6. Principal Office Address 73 MAGILL STREET		City PAWTUCKET	State RI	Zip 02860
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name ROBERTO S. GOMES		Contact Title MANAGER		
Street Address P.O. BOX 791		City PAWTUCKET	State RI	Zip 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 ROBERTO S. GOMES			Date 03/05/2024	
Signature of Authorized Person 				

FILED

MAR 06 2024
BY RWmFW
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MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov