

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.

Entity ID Number	2. Exact name of the Limited Liability Company			
000822276	MULTILANGUAGE & SERVICES, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
541930				
5. State of Formation	INTERPRETING & TRANSLATION			
RHODE ISLAND		, , , , , , , , , , , , , , , , , , , ,	-/+· , \ /	
6. Principal Office Address		City	State	Zip
73 MAGILL STREET		PAWTUCKET	RI	02860
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
ROBERTO S. GOMES		MANAGER		
Street Address		City	State	Zip
P.O. BOX 791		PAWTUCKET	RI	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			Date	
ROBERTO S. GOMES			03/05/2024	
Signature of Authorized Person Redsund Door As German Landscape Control of the C				

FILED

MAIL TO:

Division of Business Services

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

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