



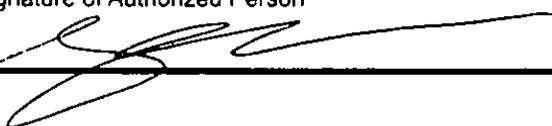
**State of Rhode Island  
Department of State - Business Services Division**

REC'D RIDGS BSD  
24 MAR 8 AM 11:30:35

**STAMP**  
FOR  
DEPARTMENT OF STATE  
USE ONLY

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 <b>001745328</b>		2. Exact name of the Limited Liability Company <b>MAE TRANSPORTATION LLC</b>	
3. NAICS Code <b>485310</b>		4. Brief description of the character of business conducted in Rhode Island <b>NON EMERGENCY MEDICAL TRANSPORTATION</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>251 GALLATIN STREET</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02907</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>JOHNEEL A PEREZ FLORES</b>		Contact Title	
Street Address <b>251 GALLATIN STREET</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02907</b>	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <i>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.</i>			
Name of Authorized Person <b>JOHNEEL A PEREZ FLORES</b>		Date <b>03/08/2024</b>	
Signature of Authorized Person 			

**FILED**

**MAR 08 2024**

**BY ML TINET**

**11:32**

**MAIL TO:**  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)