RI SOS Filing Number: 202448478100 Date: 3/12/2024 4:00:00 PM



State of Rhode Island

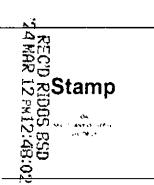
Department of State - Business Services Division

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 000488241	2. Exact name of the Limited Liability Company DYCOMM, LLC			
3. NAICS Code 541618	4. Brief description of the character of business conducted in Rhode Island To provide consulting services, any ancillary purposes, and all other lawful purposes.			
5. State of Formation RI				
6. Principal Office Address 1800 Mendon Road, Suite E-272		City Cumberland	State RI	Zip 02864
7. Mailing Address of Limite	ed Liability Company and Nar	ne or Title of Contact Person		
Contact Name Daniel C. Yorke		Contact Title Manager		
Street Address 1800 Mendon Road, Suite E-272		City Cumberland	State RI	Zip 02864
8. The Resident Agent info	rmation currently of record wit	th the RI Department of State is acc	curate. Changes requ	ire filing Form 642
	I declare and affirm that I h tatements contained herein	ave examined this report, includi are true and correct.	ng any accompany	ing schedules and
Name of Authorized Person Daniel C. Yorke			3 · 6 · 24	
Signature of Authorized Pe	rson D			

MAIL TO:

Division of Business Services

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

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