RI SOS Filing Number: 202449109210 Date: 3/18/2024 4:00:00 PM



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

**FILED** 

Annual Report for the year: Limited Liability Company

r 2024

-> Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

MAR 1 8 2024
BY W

1. Entity ID Number 518244	2. Exact name of the Limited Lia	SHATES (ONLO	ASSC 1	110	
3. NAICS Code 8 13 990 5. State of Formation	4. Brief description of the character of business conducted in Rhode Island				
RI	\		I cara	7:	
6. Principal Office Address  16 OUNTRY	fill LANE	5MITHSIELL	State	02717	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name DAVID S DO	RRX -	Contact Title TROAS UROA			
Street Appliess 16 OUNTRY	HILANE	CIN'S MI + MILELY	State	<sup>Zip</sup> 02917	
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.  1					
Name of Authorized Person	erry		Date   3   16	2024	
Signature of Authorized Derson					

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

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