RI SOS Filing Number: 202449343100 Date: 3/25/2024 4:00:00 PM

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

MAR 25 2024 02

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BY 19885

FILED

→ 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	2. Exact name of the Limited Lia	bility Company			
001723622	Vision Construction LIC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
236118					
5. State of Formation					
RI	Construction	<u> </u>			
6. Principal Office Address		Čity	State	Zip	
120 BROWN	Au	Johnston	RZ	02979	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name # e C + O R	Rose	Contact Title Manager			
Street Address		City /	State	Zip	
120 BROWN	Ave	Johnston	R5'	02919	
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 Hector Bosc			Date		
			325-24		
Signature of Authorized Person  Authorized Person					

MAIL TO:

**Division of Business Services** 

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

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