RI SOS Filing Number: 202449595770 Date: 3/27/2024 4:00:00 PM

State of Rhode Island
Department of State - Business Services Division

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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	2. Exact name of the Limited Liability Company		
1753070	MAPOGO LLC		
3. NAICS Code: 524210	4. Brief description of the character of business conducted in Rhode Island: Insurance Agency		
5. State of Formation: RI			
6. Principal Office Address: 872 Smithfield Ave	City: Lincoln	State: RI	Zip: 02865
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: Ramon Betances	Contact Title: MANAGER		
Street Address: PO Box 28604	City: Providence	State: RI	Zip: 02908
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: Ramon Betances		Date: 3/26/24	
Signature of Authorized Person: Ramon Betances			

MAIL TO:
Division of Business Services
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Website: www.sos.ri.gov