RI SOS Filing Number: 202449741780 Date: 3/28/2024 4:00:00 PM



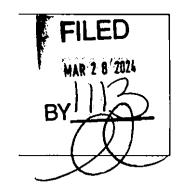
## State of Rhode Island **Department of State - Business Services Division**

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	Exact name of the Limited Liability Company     Chrup Holdings, LLC      Brief description of the character of business conducted in Rhode Island     Real Estate Investment			
001335992				
3. NAICS Code				
531110				
5. State of Formation RI	·			
6. Principal Office Address		City	State	Zip
8 Connecticut Ave		Barrington	RI	02806
7. Mailing Address of Limite	d Liability Company and Name or 1	Title of Contact Person		
Contact Name Stephanie Bernardo		Contact Title Manager		
Street Address 8 Connecticut Ave		C ty Barrington	State RI	<sup>Zip</sup> 02806
8. The Resident Agent infor	mation currently of record with the	RI Department of State is accur	ate. Changes requir	e filing Form 642.
9. Under penalty of perjur statements, and that all si	y, I declare and affirm that I have atements contained herein are t	examined this report, including and correct.	ing any accompany	ing schedules and
Name of Authorized Person			Date	
Stephanie Bernardo			3/25/2024	
Signature of Authorized Per		Jarnad-		

MAIL TO:

**Division of Business Services** 

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

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