	State of Rhode Island Office of the Secretary of State	Fee: \$50.00
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
1636	(401) 222-3040	
Limited Liability Con Annual Report Filing Period: February		
refusing to file its annua	G.L. 7-16-66(d), each limited liability company failin al report within thirty (30) days after the time presc &c)) is subject to a penalty fee of \$25.00.	
ANNUAL REPORT YE	AR - ENTER THE CURRENT YEAR 2024 : <u>2024</u>	
1. ID No. 001752715		
2. Exact Name of the Limited Liability Company <u>CS Communications, LLC</u>		
3. State of Formation		
State: <u>RI</u>		
NAICS CODE		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.		
<u>541618</u>		
4. Brief Description of Island	f the Character of the Business Which is Actually	Conducted in Rhode
PROVIDE TELECOMMUNICATIONS OR UTILITIES MANAGEMENT CONSULTING SERVICES.		
5. Principal Office Ad	ldress	
	<u>15 RICARD STREET</u> JNIT 111/112	
	<u>VOONSOCKET</u> State: <u>RI</u> Zip: <u>02</u>	2895 Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: JEFF	REY THORPE Contact Title:	
	<u>20 KANE AVENUE</u>	

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JOSEPH P. CARNEVALE, ESQ. 564 SOUTH WATER STREET PROVIDENCE , RI 02903

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 29 Day of March, 2024 at 2:21:27 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JEFFREY THORPE

Signature of Authorized Person

Form No. 632 Revised 09/07

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