RI SOS Filing Number: 202449985670 Date: 4/2/2024 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.





3. NAICS Code 44. Brief description of the character of business conducted in Rhode Island 444100 5. State of Formation RI 6. Principal Office Address 53 NORTH WILLIAMS ST Contact Name Andrew Choiniere Street Address 53 NORTH WILLIAMS ST City Johnston Contact Title Manager City Johnston State RI Zip 02919 Contact Name Andrew Choiniere Contact Title Manager Street Address 53 NORTH WILLIAMS ST City Johnston State RI Zip 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 as statements, and that all statements contained herein are true and correct. Name of Authorized Person Stephen M. Pezza	101 <i>74274</i> 3	Entity ID Number 2. Exact name of the Limited Liability Company				
Sale and installation of building products 5. State of Formation RI 6. Principal Office Address 53 NORTH WILLIAMS ST 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Andrew Choiniere Street Address 53 NORTH WILLIAMS ST City Johnston Contact Title Manager Street Address 53 NORTH WILLIAMS ST City Johnston State Zip 02919 Contact Title Manager Street Address 53 NORTH WILLIAMS ST City Johnston State RI Zip 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 all statements, and that all statements contained herein are true and correct. Name of Authorized Person	301172173	Royal Exteriors, LLC				
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Stephen M. Pezza 3/8/2024	Name of Authorized Person			Date		
	Stephen M. Pezza			3/8/2024		
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MAIL TO:

Division of Business Services

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

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