



State of Rhode Island
Department of State - Business Services Division

FILED

APR 08 2024

BY 1659
QA

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 001690514		2. Exact name of the Limited Liability Company SWYVZ, LLC		
3. NAICS Code 334210		4. Brief description of the character of business conducted in Rhode Island cell phone and related accessory development and sales		
5. State of Formation Rhode Island				
6. Principal Office Address 29 Swan Road		City Smithfield	State RI	Zip 02917
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Derrick Polseno, Sr.		Contact Title Member		
Street Address 29 Swan Road		City Smithfield	State RI	Zip 02917
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 Derrick Polseno, Sr.			Date 4/1/24	
Signature of Authorized Person 				

MAIL TO:
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