



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.

FILED

APR 10 2024

BY

1. Entity ID Number 001725381		2. Exact name of the Limited Liability Company 6S, LLC	
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island TO SUBLET REAL ESTATE	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 650 NEWPORT AVENUE		City PAWTUCKET	State RI
Zip 02861			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name CRYSTAL MCKENNA		Contact Title MEMBER	
Street Address 21 NORTH STREET		City RIVERSIDE	State RI
Zip 02915			
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 CRYSTAL MCKENNA			Date 4/4/2024
Signature of Authorized Person 			

MAIL TO:

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