

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

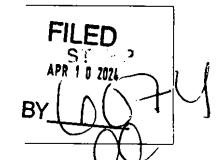
Annual Report for the year: 2024

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.



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1 Entity ID Number	2. Exact name of the Limited Liability Company			
1683721	SB CONSTRUCTION, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
236115	PROPERTY MANAGEMENT, CONSTRUCTION AND PROJECT			
5. State of Formation	MANAGEMENT.	, 00.1011.0011011	7.110 1 7.0	0001
RHODE ISLAND	TO THE COLUMN TO			
6. Principal Office Address	City		State	Zip
7 TWIN LEAF TRAIL		JNDERSTOWN	RI	02874
7. Mailing Address of Limited	Liability Company and Name or Title of Con	tact Person	<u> </u>	
Contact Name JAKE SANT		Contact Title MEMBER		
7 TWIN LEAF TRAIL		SAUNDERSTOWN	State RI	^{Zip} 02874
8. The Resident Agent informa	ation currently of record with the RI Departm	ent of State is accurate. C	.I hanges require	filing Form 642
9 Under penalty of perjury,	declare and affirm that I have examined ements contained herein are true and co	this report, including an		
Name of Authorized Person			Date	
JAKE SANTILLI, MEMBER			4/	1/24
Signature of Authorized Perso		**	1	

MAIL TO:

Division of Business Services

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

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