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State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2024

-> 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					
001758774	Retire with Joe, LLC					
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island acquire, develop, manage, operate and/or sell retirement services and insurance					
5. State of Formation RI						
6. Principal Office Address		City	State	Zip		
42 Albion Road, Suite 106		Lincoln	RI	02865		
7. Mailing Address of Limited Lia	ibility Company and Name or Ti	tle of Contact Person				
Contact Name Joseph J. Pate		Contact Title	Contact Title			
Street Address 42 Albion Road, Suite 106		^{City} Lincoln	State RI	^{Zip} 02865		
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 Joseph J. Pate			Date 3 (15/24			
Signature of Authorized Person Output Delignature of Authorized Person						
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MAIL TO:

Division of Business Services

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

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