		e of Rhode Isla the Secretary		Fee: \$50.00
		n Of Business Se		
148 W. River Street				
Providence RI 02904-2615				
7636	((401) 222-3040		
Limited Liability (Annual Report				
Filing Period: Februa	ary 1 - May 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. ID No. <u>001693749</u>				
2. Exact Name of the Limited Liability Company <u>CL ENTERPRISES, LLC</u>				
3. State of Format	ion			
State: <u>MA</u>				
	N	AICS CODE		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>236118</u>				
4. Brief Description Island	n of the Character of the E	Business Which	is Actually Conc	lucted in Rhode
CARPENTRY AND FLOOR INSTALLATIONS				
5. Principal Office	Address			
No. and Street:	38 AMES STREET			
City or Town:	BROCKTON	State: MA	Zip: <u>02301</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Co	ontact Title:			
No. and Street:	38 AMES STREET			
City or Town:	BROCKTON	State: MA	Zip: <u>02301</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
REGISTERED AG	GENTS INC 47 WOOD AVE	ENUE, SUITE 2 E	ARRINGTON , F	<u>81 02806</u>

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 30 Day of April, 2024 at 9:39:30 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By **ROBIN JONES**

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved