RI SOS Filing Number: 202453843090 Date: 5/3/2024 11:50:00 AM



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

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Annual Report for the year: 2023

**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	2. Exact name of the Limited Liability Company			
001710466	StChase Accounting Solutions, LLC			
3. NAICS Code 541219	Brief description of the character of business conducted in Rhode Island  Accounting Services			
5. State of Formation				
6. Principal Office Address	<del></del>	City	State	Zip
143 Smith Road		Harrisville	RI	02830
7. Mailing Address of Limited	Liability Company and Name of	r Title of Contact Person	<u> </u>	1
Contact Name Stephen Chase		Contact Title Owner		
Street Address 143 Smith Road		City Harrisville	State RI	Zip 02830
8. The Resident Agent inform	ation currently of record with th	e RI Department of State is accur	rate. Changes require	filing Form 642.
	. I declare and affirm that I ha tements contained herein are	ve examined this report, includ true and correct.	ing any accompanyir	ng schedules and
Name of Authorized Person Stephen Chase			Date 5/3/2024	
Signature of Authorized Pers		Nan	1	

11:50

FILED

MAY 3,2024

BY YZWF9

M

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov