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## 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.



1. Entity ID Number 001748531	2. Exact name of the t	Exact name of the Limited Liability Company     Mapblender LLC      4. Brief description of the character of business conducted in Rhode Island     Custom Computer Programming Service			
3. NAICS Code <b>541511</b>	•				
5. State of Formation AZ		_			
6. Principal Office Address 401 N San Francisco Street		City Flagstaff	State AZ	Zip <b>86001</b>	
7. Mailing Address of Limite	ed Liability Company and Na	me or Title of Contact Person		. 1	
Contact Name Stephen J. Sontag		Contact Title Authorized Person			
Street Address 401 N San Francisco Street		City Flagstaff	State AZ	Zip <b>86001</b>	
8. The Resident Agent infor	mation currently of record wi	th the RI Department of State is a	ccurate. Changes requ	ire filing Form 642.	
	l declare and affirm that I h tatements contained hereii	nave examined this report, incluing are true and correct.	ding any accompanyi	ing schedules and	
Name of Authorized Person Stephen J. Sontag			Date 4/25/24		
Signature of Authorized Per	rson				

FILED

MAIL TO:

**Division of Business Services** 

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

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