RI SOS Filing Number: 202453900720 Date: 4/29/2024 3:35:00 PM

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

Annual Report for the year: **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.

REC'D RIDOS BSD '24 APR 29 PK3:34:5	
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1 Entity ID Number	nber 2. Exact name of the Limited Liability Company					
001714723 Northeast MDT'S LLC						
3. NAICS Code	Code 4. Brief description of the character of business conducted in Rhode Island					
541519	Northeast provides emergency equipment to First features.					
5. State of Formation	ite of Formation First Readmeter ?					
RI	(11)) 1-10 0031					
6. Principal Office Address		City	State	Zip		
427 Sylvan	Court	Saunderstam	RI	02874		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name	Contact Title					
Ryan Garcet	1 %√0	Owner				
Street Address		City Saunderstown	State	Zip		
427 Sylvan Car	urt	Sanderstown	RI	028>4		
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		·	Date			
RYAN GALO	Fanc		4-1-24			
Signature of Authorized Person						

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MAIL TO:

Division of Business Services

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

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