



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2022

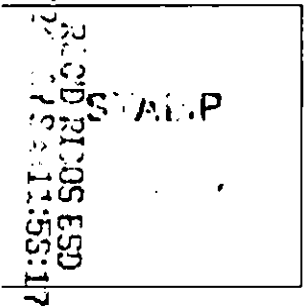
Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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|  |  |   |                    |
|--|--|---|--------------------|
| 1. Entity ID Number<br><b>001703433</b>  |  | 2. Exact name of the Limited Liability Company<br><b>Coexs LLC</b>  |                    |
| 3. NAICS Code<br><b>423990</b>   |  | 4. Brief description of the character of business conducted in Rhode Island<br><b>Wholesaler of various goods</b> |                    |
| 5. State of Formation<br><b>RI</b>   |  |   |                    |
| 6. Principal Office Address<br><b>22 Parsonage St., STE 154</b>  |  | City<br><b>Providence</b>   | State<br><b>RI</b> |
|  |  | Zip<br><b>02903</b>   |                    |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person  |  |   |                    |
| Contact Name<br><b>Roni Kabessa</b>  |  | Contact Title<br><b>Member</b>  |                    |
| Street Address<br><b>22 Parsonage St., STE 154</b>   |  | City<br><b>Providence</b>   | State<br><b>RI</b> |
|  |  | Zip<br><b>02903</b>   |                    |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.  |  |   |                    |
| 9. <i>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.</i> |  |   |                    |
| Name of Authorized Person<br><b>Roni Kabessa</b>   |  | Date<br><b>04/16/2024</b>   |                    |
| Signature of Authorized Person<br>  |  |   |                    |

**FILED**

**MAY 9 2024**

**BY TWZ60**

**A.R**

**MAIL TO:**

**Division of Business Services**

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

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