



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

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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 1742905 | | 2. Exact name of the Limited Liability Company BESHEL TRANSPORTATION SERVICES LLC | |
| 3. NAICS Code 485999 | | 4. Brief description of the character of business conducted in Rhode Island WE OPERATE A NON-EMERGENCY MEDICAL TRANSPORTATION BUSINESS AND TRANSPORT MEMBERS FROM THEIR HOMES OR FACILITIES TO THEIR APPTS AND BACK | |
| 5. State of Formation RI | | | |
| 6. Principal Office Address 75 BARRETT AVENUE | | City NORTH PROVIDENCE | State RI |
| Zip 02904 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name JOSEPH A. BESHEL | | Contact Title | |
| Street Address 75 BARRETT AVENUE | | City NORTH PROV | State RI |
| Zip 02904 | | | |
| 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 JOSEPH A. BESHEL | | Date 5/17/2024 | |
| Signature of Authorized Person  | | | |

FILED

MAY 17 2024
 BY 416K4E
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MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov