



State of Rhode Island
Department of State - Business Services Division

FILED STAMP
MAY 24 2024
BY *[Signature]*
SECRETARY OF STATE
OFFICE

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 001746102 | | 2. Exact name of the Limited Liability Company SERIE034 FOOD MARKET, LLC | |
| 3. NAICS Code 445110 | | 4. Brief description of the character of business conducted in Rhode Island GROCERY STORE | |
| 5. State of Formation RHODE ISLAND | | | |
| 6. Principal Office Address 103 ACADEMY AVENUE | | City PROVIDENCE | State RI |
| Zip 02908 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name EDWIN JIMENEZ | | Contact Title MANAGER | |
| Street Address 186 WARREN AVENUE | | City CRANSTON | State RI |
| Zip 02920 | | | |
| 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 EDWIN JIMENEZ | | Date 12/07/2023 | |
| Signature of Authorized Person <i>EDWIN JIMENEZ</i> | | | |

MAIL TO:
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