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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

| FILED | • |
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| IUN 14 2024 | |
| 4583 | 5 |

| 1 Entity ID Number 001675413 | 2 Exact name of the Limited Liability Company Northern Contractors, LLC | | | | |
|--------------------------------------|--|--|----------------------|-----------------------|--|
| 3 NAICS Code 238990 | Brief description of the character of business conducted in Rhode Island General Contracting | | | | |
| 5 State of Formation Rhode Island | | | | | |
| 6. Principal Office Address | | City | State | Zıp | |
| 570 Douglas Avenue | | Providence | RI | 02908 | |
| 7 Mailing Address of Limite | d Liability Company and Name | e or Title of Contact Person | .1 | - ' | |
| Contact Name Michael McGovern | | Contact Title Member | | | |
| Street Address 570 Douglas Avenue | | City Providence | State RI | Z _{IP} 02908 | |
| 8 The Resident Agent infor | mation currently of record with | the RI Department of State is accu | irate Changes requir | e filing Form 642 | |
| | l declare and affirm that I hav atements contained herein a | re examined this report, including the true and correct. | g any accompanyin | g schedules and | |
| Name of Authorized Person | | | Date | Date | |
| Michael McGovern | | | 1 616124 | | |
| Signature of Authorized Ren | son | | | , - | |

MAIL TO:

Division of Business Services

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

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