RI SOS Filing Number: 202457068570 Date: 6/24/2024 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

REC'D RIDOS BSD A JUN 24 AMS:52:

Annual Report for the year: 2023
Limited Liability Company

→ Fiting period: February 1 - May 1

→ Filing Fee: \$50.00

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

		<u>. </u>		
Entity ID Number	2. Exact name of the Limited Lia	bility _, Company		
001735250	ARM Prope	rty Solution	3/1C	
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
236/18				
5. State of Formation				
RI	Remodel Exsis	timen properties	Along	with Require
6. Principal Office Address	c. le	City	State	Zip
1031 Planti	eld St 14	Johnston	RI	02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Adam Francelli		President		
Street Address	// // Suite	John Ston	State	Zip
1031 Plainfield St Suite		Johnston	I RI	02919
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	
Adam Fraielli			6-24-24	
Signature of Authorized Person				
NON				

JUN 24 2024

MAIL TO:

Division of Business Services148 W. River Street, Providence, Rhode Island 02904-2615

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