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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 3 Track

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1. Entity ID Number	2. Exact name of the Lim	2. Exact name of the Limited Liability Company			
1759406	F/V Resilient Fig	F/V Resilient Fisheries, LLC			
3. NAICS Code	4. Brief description of the	4. Brief description of the character of business conducted in Rhode Island			
To purchase, lease and/or rent vessels of all kinds, to				te such vessels in	
5. State of Formation		the fishing industry			
Rhode Island	and the management of				
6. Principal Office Address		City	State	Zip	
3121A Post Road		Wakefield	RI	02879	
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person			
Contact Name Michael L. Marchetti		Contact Title Member			
Street Address 3119 Post Road		City Wakefield	State RI	^{Zip} 02879	
8. The Resident Agent infor	mation currently of record with	the RI Department of State is accur	rate. Changes require	e filing Form 642.	
Under penalty of perjury, statements, and that all s	l declare and affirm that I hav tatements contained herein a	re examined this report, including re true and correct.	g any accompanyin	g schedules and	
Name of Authorized Persor	1		Date		
Michael L. Marchetti			- 13/1	3 , 2024	
Signature of Authorized Pe	n/1. Um cut				
we	1. Um-cent				

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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