

State SORho Heilinga Not mber: 202458520040 Date: 8/2/2024 4:00:00 PM

**Department of State - Business Services Division** 

Annual Report for the year: Limited Liability Company

2024

\_\_\_\_

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

REC'D RIDOS ESD '24 AUG 2 AM 10:35:08

1. Entity ID Number	2. Exact name of the Limited Lia	bility Company		
1759326	helson and	Sons Public S	ervice )	10
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
1485999		•		
5. State of Formation	tremium ride	service, Uber	Black	
RI		·	<u>-</u>	
6. Principal Office Address		City	State	Zip
52 Farragut	ALL	providence	RZ	67905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
nelson Lozada		Owner		
Street Address		City	State	Zip
52 Farragut Aul		Providence	R2_	02905
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	
Nelson Loza		08.02.2024		
Signature of Authorized Person				

MADE NON-SUBSTANTIVE EDITS

FILED

AUG 0 2 2024 BY BUYEM

MAIL TO:

Division of Business Services

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

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