



State of Rhode Island  
Department of State - Business Services Division

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 FOR  
 DEPARTMENT OF STATE  
 RI ONLY

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 <b>001718258</b>		2. Exact name of the Limited Liability Company <b>BETTER DAYS, LLC</b>		
3. NAICS Code <b>485999</b>		4. Brief description of the character of business conducted in Rhode Island <b>NON-EMERGENCY TRANSPORTATION SERVICES</b>		
5. State of Formation <b>RHODE ISLAND</b>				
6. Principal Office Address <b>17 Alexander Drive</b>		City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name <b>FATAI FOLARIN</b>		Contact Title		
Street Address <b>17 Alexander Drive</b>		City <b>West Warwick</b>	State <b>RI</b>	Zip <b>02893</b>
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 <b>FATAI FOLARIN</b>			Date <b>8/9/2024</b>	
Signature of Authorized Person				

**NOT FILED 312**  
**AUG - 9 2024**  
**BY RPX 09**

**MAIL TO:**  
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