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## State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: **Limited Liability Company** 

2624

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

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1 Entity ID Number 000506147	2. Exact name of the Limited Liability Company Steve Allen Plumbing Service LLC  4. Brief description of the character of business conducted in Rhode Island Plumbing Service			
3. NAICS Code 238220				
5. State of Formation Rhode Island				
Principal Office Address     118 Brookfarm Road South		City South Kingstown	State RI	Z <sub>ip</sub> 02879
7. Mailing Address of Limite	ed Liability Company and Name or	Title of Contact Person		<u></u>
Contact Name Stephen W. Allen Jr		Contact Title Owner		
Street Acdress P.O. Box 5309		City Wakefield	State RI	<sup>Zrp</sup> 02880
8 The Resident Agent info	mation currently of record with the	RI Department of State is accurat	L e. Changes require	e filing Form 642.
	y, I declare and affirm that I hav tatements contained herein are	e examined this report, including true and correct.	д апу вссотрвпу	ring schedules and
Name of Authorized Person Stephen W. Allen Jr			Date 08/15/2024	
Signature of Authorized Fe	rson half		<del>\</del>	

MAIL TO:

**Division of Business Services** 

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

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