

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 224
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	2. Exact name of the Limited Liability Company				
001757977	Blen Trans IIc.				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
ムのペーク) 5. State of Formation	Semi-Truck Transportation				
BI		4			
6. Principal Office Address		City	State	Zıp	
79 Robin St		Providence	RI	02908	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Adonal-Mulugeta		nwner			
Street Address		City	State	Zip	
79 Robin St		Providence	RI	02908	
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		
_ donax			08-77-24		
Signature of Authorized Person					

FILED

AUG 27 2024

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MAIL TO:

Division of Business Services

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

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