

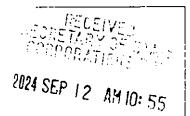
State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2023
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 001726739 | 2. Exact name of the Limited Liability Company Bellevue Boards, LLC 4. Brief description of the character of business conducted in Rhode Island Cheese and charcuterie board catering | | | |
|--|--|---|------------------------|----------------------|
| 3. NAICS Code 722320 | | | | |
| 5. State of Formation Rhode Island | | | | |
| 6. Principal Office Address | | City | State | Zip |
| 183 Kay Street | | Newport | RI | 02840 |
| 7. Mailing Address of Limite | d Liability Company and Name or I | itle of Contact Person | | |
| Contact Name Jacqueline Grant | | Contact Title Owner | | |
| Street Address 183 Kay Street | | City Newport | State RI | ^{Zip} 02840 |
| 8. The Resident Agent info | mation currently of record with the I | RI Department of State is acc | urate. Changes require | e filing Form 642. |
| 9. Under penalty of perjuit statements, and that all s | y, i declare and affirm that I have tatements contained herein are tr | exemined this report, inclu- ue and correct. | ding any accompany | ring schedules and |
| Name of Authorized Person Jacqueline M Grant |) | | Date 9/11/2024 | |
| Signature of Authorized Pe | Inm Gran | t | | |
| - 7 | | | | |

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**

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FORM 632 - Revie