

## State of Rhode Island

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

Annual Report for the year: 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.



Entity ID Number	2. Exact name of the Limited Liability Company Riveter Saltworks LLC			
001713197				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
424490	SEASALT HARVESTING			
5. State of Formation				
RI				
6. Principal Office Address		City	State	Zip
32 BANFIELD LANE		SAUNDERSTOWN	RI	02874
7. Mailing Address of Limite	d Liability Company and Name or T	Title of Contact Person		
CHRISTINE BOUVIER		Contact Title		
Street Address 32 BANFIELD LANE		City SAUNDERSTOWN	State RI	<sup>Zip</sup> 02874
8. The Resident Agent infor	mation currently of record with the I	RI Department of State is accurate. (	Changes requir	e filing Form 642.
	y, I declare and affirm that I have tatements contained herein are tr	examined this report, including a rue and correct.	ny accompany	ying schedules and
Name of Authorized Person			Date	- /-
CHRISTINE BOUVE	ER //			5/24
Signature of Authorited Per	son//////		\	70-7

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** 

OCT 1 5 2024

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FORM 632 - Revised: 12/2023