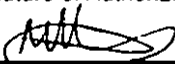


State of Rhode Island
Department of State - Business Services DivisionREC'D RIDOS BSD
NOV 19 AM 9:13:04Annual Report for the year: 2025
Limited Liability Company

- 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 001746492 | | 2. Exact name of the Limited Liability Company MELVIN POWER WASH LLC | | |
| 3. NAICS Code 561790 | | 4. Brief description of the character of business conducted in Rhode Island PERFORMS PRESSURE HOUSE WASHING | | |
| 5. State of Formation RI | | | | |
| 6. Principal Office Address 883 ATWELLS AVE | | City PROVIDENCE | State RI | Zip 02909 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | |
| Contact Name MELVIN NORIEGA | | Contact Title OWNER | | |
| Street Address 883 ATWELLS AVE | | City PROVIDENCE | State RI | Zip 02909 |
| 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 MELVIN NORIEGA | | | Date 11/18/2024 | |
| Signature of Authorized Person  | | | | |

FILED

9:17am

NOV 19 2024

BY LSS MFEOT

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov