

## State of Rhode Island

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

Annual Report for the year: 2024 **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 Lia			<del>-</del>
1745916	RUDOPH SERVICES LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
236118	HANDYMAN/CON	ISTRUCTION		
5. State of Formation	17,100	<b>3</b>		
RI				
6. Principal Office Address		City	State	Zip
200 Old CANTERBURY TRPK		NORWICH	CT	06360
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Keeri Brunelle				
Street Address 1253 Atwood Ave,		Johnston	State	029/9
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 /	1 .
JASON RU	00DIL		11/4	24
Signature of Authorized Herson				

**FILED** 

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MAIL TO:

**Division of Business Services** 

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

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