State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

→ Filing period: February 1 - May 1

→ Filling Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2024

1. Entity ID Number 000905400	2. Exact name of the Limited Liability Company MORAN BROTHERS LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island Ice cream store				
6. Principal Office Address 315 FARMHOLME ROAD		City STONINGTON	State CT	Zip 06378	
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person			
Contact Name GERI MORAN		Contact Title OWNER/OPERATOR			
Street Address 315 FARMHOLME ROAD		City STONINGTON	StateCT	^{Zip} 06378	
8. The Resident Agent inform	ation currently of record with	the RI Department of State is accurate	e. Changes requir	e filing Form 642.	
9. Under penalty of perjury, statements, and that all sta		ave exemined this report, including re true and correct.	g any accompany	ring schedules and	
Name of Authorized Person GERI L. MORAN			Date 11-23-2024		
Signature of Authorized Person	on lovau				

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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