RI SOS Filing Number: 202461480500 Date: 12/5/2024 4:13:00 PM 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.

1. Entity ID Number	2. Exact name of the Limited Liability Company				
001710575	innovation.	TRS mostru	oction	LLC	
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
236118	Homa rena	nation			
5. State of Formation	The terms	V-(· · Oi)			
R)			<u> </u>		
6. Principal Office Address		City	State	Zip	
39 southern 87		Cranston	RI	02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
FRMY FERNANCH F		Owner			
Street Address		City	State	Zip	
39 Southern 99		Cranston	RI	02920	
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	_ l_ _		Date		
Ermy lar	mandez		12-05-2024		
Signature of Authorized Person					

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DEC 0 5 2024

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FORM 632 - Revised: 12/2023