

State of Rhode Island Department of State - Business Services Division

REC'D RIDIS BSD 25 JAN 9 FK2:03:55

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 Lial	bility Company		-
1001734851	159 Ruthera	ien LC		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
236115	Construction paint			
5. State of Formation				
RI	Premodelin	9		
6. Principal Office Address	1	eity	State	Zip
159 Ruthera	len 5	Providence	RI	07907
7. Mailing Address of Limited Lability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Norma	I DIGZ			
Street Address / /		City /	State	Zip 57
159 Ruthergl	en AUE	Providence	RI	202907
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	_
Norma I DIGZ			1-9-25	
Signature of Authorized Person				
Mu (L 8)				

FILED

JAN 0 9 2025

MAIL TO:

Division of Business Services

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

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