RI SOS Filing Number: 202562691210 Date: 1/16/2025 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

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Annual 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 | 2. Exact name of the Limited Liability Company | | | |
|---|--|-----------------|-----------|--------------|
| 000119394 | IRISH JIGCHARTERS LLC | | | |
| 3. NAICS Code | Brief description of the character of business conducted in Rhode Island | | | |
| 336611 5. State of Formation | CHARTER FISHING | | | |
| | CHILD CI | | | |
| RF | | | | |
| 6. Principal Office Address | <u> </u> | City | State _ | Zip |
| 947 OLD BAPTSTRD | | No RTh GANSTOWN | RI | 02852 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | |
| Contact Name | | Contact Title | | |
| DAVID McCormide | | OWNER OPERATOR | | |
| Street Address 947 OCD BAPHST RT) | | Worth Kingstown | State | zip 02852 |
| 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 / / | |
| DAVID McConmick | | | 1/16/2025 | |
| Signature of Authorized Person Canad | | | | |

MAIL TO:

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

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