

State of Rhode Island **Department of State - Business Services Division**

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				
001765066	The Charon LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
812210	Receives Calls from funeral Homes				
5 State of Formation	Ito Transport Doladonk la ina ana				
1 2. T	to Transport Decedents to the respective				
[K] Funeral Home					
6. Principal Office Address		City		State	Zıp
210 Taunton Avenue		East 1	Providence	RT	02914
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Kyle Gill		Owner			
Street Address		City	5 . 1	State	Zip
Street Address 210 Tau	inton Avenue	East	Providence	RI	02914
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	
Kyle Gill			01/21/2025		
Signature of Authorized Person					
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MAIL TO:

Division of Business Services

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

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