State o	f Rhode Island	Fee: \$50.00
Office of the	e Secretary of State	
	of Business Services	
	V. River Street ce RI 02904-2615	
	1) 222-3040	
Limited Liability Company		
Annual Report Filing Period: February 1 - May 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or		
refusing to file its annual report within thirty (30) days after the time prescribed by		
law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.		
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025		
1. ID No. <u>001670244</u>		
2. Exact Name of the Limited Liability Company C.m.p. sales llc.		
3. State of Formation		
State: <u>RI</u>		
NAICS CODE		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.		
<u>999999</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island		
SALES		
5. Principal Office Address		
No. and Street: 38 WEEKAPAUG ROAD		
City or Town: WESTERLY	State: <u>RI</u> Zip: <u>02891</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: CIRO MICHAEL PAOLELLA Contact Title: OWNER		
No. and Street: <u>38 WEEKAPAUG ROAD</u>		
City or Town: <u>WESTERLY</u>	State: <u>RI</u> Zip: <u>02891</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11		
<u>C. MICHAEL PAOLELLA 38 WEEKAPAUG ROAD WESTERLY</u> , <u>RI 02891</u>		

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 2 Day of February, 2025 at 10:36:24 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CIRO MICHAEL PAOLELLA

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2025 State of Rhode Island All Rights Reserved