

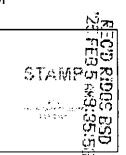
## State of Rhode Island

## 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.



2. Exact name of the Limited Liability Company NORTHSTAR CONSTRUCTION SERVICES LLC			
· · · · · · · · · · · · · · · · ·			Restaurant
<u></u>	City	State	Zip
	Ozark	МО	65721
Liability Company and Name of	or Title of Contact Person		1
MANGUM	Contact Title SOLE MANAGING MEMBER		
JTH ST, SUITE A	City OZARK	State MO	<sup>Zlp</sup> 65721
mation currently of record with the	he RI Department of State is acc	urate. Changes require	filing Form 642.
y, I declare and affirm that I ha	eve examined this report, inclu		
<del></del>	<u> </u>	Date	
		1/31/25	
	4. Bnef description of the General Commercial Chains.  Liability Company and Name of MANGUM  JTH ST, SUITE A mation currently of record with the first of the clare and affirm that I have been supported by the clare and the clare	A. Bnef description of the character of business conducted General Commercial Construction Specialize Chains.  City Ozark  Liability Company and Name or Title of Contact Person  Contact Title SOLE MA  JTH ST, SUITE A  City OZARK  City OZARK	A. Brief description of the character of business conducted in Rhode Island General Commercial Construction Specializing in Nationwide Chains.  City Ozark  City Ozark  MO  Contact Title  SOLE MANAGING MEMB  City OZARK  City OZARK  City OZARK  City OZARK  State MO  Contact Title  City OZARK  City OZARK  State MO  Contact Title SOLE MANAGING MEMB  City OZARK  Including any accompany attements contained herein are true and correct.

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

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