

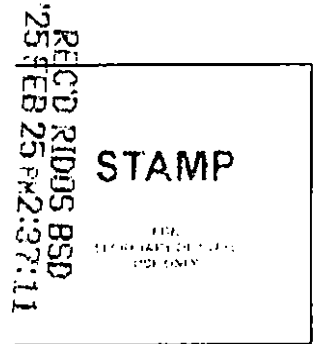


State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

2025

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.



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|---|--|--|---|
| 1. Entity ID Number <u>001760581</u> | | 2. Exact name of the Limited Liability Company <u>3F TRANSPORTATION LLC</u> | |
| 3. NAICS Code <u>484121</u> | | 4. Brief description of the character of business conducted in Rhode Island <u>TRANSPORTATION</u> | |
| 5. State of Formation <u>RI</u> | | | |
| 6. Principal Office Address <u>5 BRANCH AVE</u> | | City <u>WEST WARWICK</u> | State <u>R.I.</u> Zip <u>02893</u> |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name <u>JAIME B. FAVAYS</u> | | Contact Title | |
| Street Address <u>5 BRANCH AVE</u> | | City <u>WEST WARWICK</u> | State <u>R.I.</u> Zip <u>02893</u> |
| 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 <u>JAIME B. FAVAYS</u> | | Date <u>02/25/2025</u> | |
| Signature of Authorized Person <u>[Signature]</u> | | | |

FILED

FEB 25 2025

BY

GHSA

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MAIL TO:

Division of Business Services
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Website: www.sos.ri.gov