



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

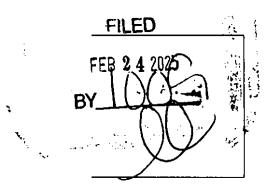
Annual Report for the year: Limited Liability Company

2025

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.



1. Entity ID Number	2. Exact name of the Limited Liability Company First Nations Finance LLC			
3. NAICS Code 522310 5. State of Formation RI	Brief description of the character of business conducted in Rhode Island     Financing of properties commercial and investment residential			
6. Principal Office Address		City	State	Zip
20 E Baylies Road		Chariton	MA	01507
7. Mailing Address of Limited L	iability Company and Name or T	itle of Contact Person		<del></del>
Contact Name Thomas J Palmerino		Contact Title Owner		
Street Address 20 E Baylies Rd		City Charlton	State Ma	<sup>Zip</sup> 01507
8. The Resident Agent informa	ition currently of record with the F	RI Department of State is accu	urate. Changes require	filing Form 642.
	declare and affirm that I have ements contained herein are tr		ding any accompany	ing schedules and
Name of Authorized Person Thomas J Palmerino			Date 02-17 2025	
Signature of Authorized Person	Thomas (Talm	xereno	· · · · · · · · · · · · · · · · · · ·	

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.n.gov