

State of Rhode Island Department of State

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2024

- → 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				
1670062	Superior Wireless Services, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
237130	Cellular communication retrofits and upgrades				
5. State of Formation					
МА			•		
6 Principal Office Address	<u></u>	City	State	Zip	
208 Main St		Sturbridge	MA	01566	
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person			
Contact Name Colleen Snyder		Contact Tille Office Manager			
Street Address 208 Main St		City Sturbridge	State MA	^{Zip} 01566	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
	leclare and affirm that I have ex nents contained herein are true		ling any accompanyi	ng schedules and	
Name of Authorized Person			Date	Date	
Susan Snyder			2/21/2025		
Signature of Authorized Person			•		
SusanSnyder					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

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