

1. Entity ID Number	2. Exact name of the Limited Liab	•			
001676785	MAB &	Interprises,	<u> 나</u>		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531390	Reclassase	( of sery			
5. State of Formation	Peti				
RI		/			
6. Principal Office Address			State	Zip	
1833 Cranston Street		Cranston	RI	0.29.20	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title Owner			
Michael Bert					
Street Address 1833 Cranston Street		city Cranston	State	02920	
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	^ ^	···	Date	ulac	
Michael	A Bent		1124(25		
Signature of Authorized Person  Merchant A. Best					
9					

FEB 27 2025,
BY 1484

MAIL TO:

**Division of Business Services** 

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

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