

State of Rhode Island Department of State - Business Services Division

FILED

Annual Report for the year: Limited Liability Company

MAR 03 2025

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→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

BY	677	3,1
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1. Entity ID Number	2 Evect name of the Limite	d Liability Company	·			
•	E .	2. Exact name of the Limited Liability Company				
ι 000159567	SACHUEST MARINE, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
238320	MARINE PAINTING					
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zip		
625 THAMES STREET		NEWPORT	RI	02840		
7. Mailing Address of Limite	d Liability Company and Name or	Title of Contact Person				
Contact Name MAURICE CUSICK		Contact Title ATTORNEY				
Street Address 625 THAMES STREET		City NEWPORT	State RI	^{Zip} 02840		
8. The Resident Agent info	mation currently of record with the	RI Department of State is accur	ate. Changes requir	e filing Form 642.		
9. Under penalty of perjui	y, I declare and affirm that I hav tatements contained herein are	re examined this report, includi	ng any accompan	ying schedules and		
Name of Authorized Person			Date			
MAURICE CUSICK			2/26/25			
Signature of Authorized Pe	rson					
M/R) E	WOR			·		

MAIL TO:

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