



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025

Limited Liability Company

→ Filing period: February 1 - May 1

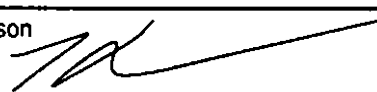
→ Filing Fee: \$50.00

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

FILED

MAR 06 2025

BY

1. Entity ID Number 001720979		2. Exact name of the Limited Liability Company CBMM, LLC		
3. NAICS Code 442291		4. Brief description of the character of business conducted in Rhode Island Window treatments		
5. State of Formation RI				
6. Principal Office Address 390 Glen Farm Rd		City Portsmouth	State RI	Zip 02871
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Kristin Re		Contact Title Owner		
Street Address 390 Glen Farm Rd		City Portsmouth	State RI	Zip 02871
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 Kristin Re			Date 3/3/25	
Signature of Authorized Person 				

MAIL TO:

Division of Business Services

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