



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.

REC'D RHODE ISLAND
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FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 001771843		2. Exact name of the Limited Liability Company DIAMPLAYE DISTRIBUTION LLC	
3. NAICS Code 53110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE	
5. State of Formation RI			
6. Principal Office Address 375 PAWTUCKET AVE		City PAWTUCKET	State RI
		Zip 02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name D B LAYE GUEYE		Contact Title	
Street Address 375 PAWTUCKET		City PAWTUCKET	State RI
		Zip 02860	
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 ABLAYE GUEYE		Date 3-7-2025	
Signature of Authorized Person [Signature]			

FILED

MAR 07 2025
BY [Signature]
AA

MAIL TO:
Division of Business Services
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