

State of Rhode Island

Department of State - Business Services Division

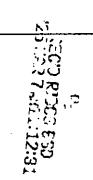
Annual Report for the year: Partnership (LP, LLP, LLLP)

2025

→ 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 Partnership					
000145502	CROSSLAYS ESTAYES					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
1531110		· Par	L GSTATE			
5. State of Formation	Ren T.	ish read	- MI			
R.I.						
6. Principal Office Address			City	State	Zip	
1 JeffRey ReAD			NEWPORT	RIL	07848	
7. The name and business address of each general partner or one or more partner(s); LP and LLLP only: an amendment is required to record a change in general partner(s) - use Form 301 (domestic) or Form 351 (foreign).						
PARTNER BUSINESS			SINESS ADDRESS			
DOOD L REED		1 JEFFREY ROAD NEWPORT RIO28/0				
Leslie M. REED		1 JEFFREY RAD NEAR PAT RIL CARYO				
	,			·		
Under penalty of perjury, I de- and correct.	clare and affirm t	hat I have exam	ined this report, and that al	ll statements containe	ed herein are true	
Name of General Partner or Authorized Representative				Date		
DOOD L. REED				03/04/6	1085	
Signature of General Partner or Authorized Representative						
Dung L Reed						

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 07 2025

FORM - 634 Revised: 12/2023