RI SOS Filing Number: 202566880070 Date: 3/11/2025 4:00:00 PM

2. Exact name of the Limited Liability Company

City

City

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

Marlborough

Concord

Contact Title

Consulting Civil Engineering



State of Rhode'Island Department of State - Business Services Division

Annual Report for the year: **Limited Liability Company**

2025

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

statements, and that all statements contained herein are true and correct.

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

1. Entity ID Number

5. State of Formation

6. Principal Office Address

Name of Authorized Person

266754

54133

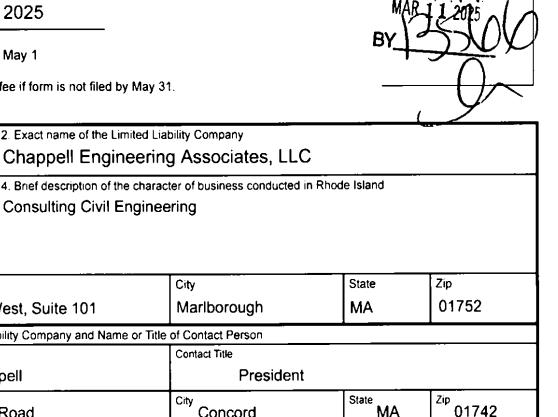
MA

Contact Name

Street Address

3. NAICS Code

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



Date

3-6-25

David A. Chappell Signature of Authorized Person Mapel

201 Boston Post Road West, Suite 101

David A. Chappell

101 Nashoba Road

MAIL TO:

Division of Business Services 148 W. River Street. Providence, Rhode Island 02904-2615

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