RI SOS Filing Number: 202567013710 Date: 3/12/2025 2:33:00 PM



State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 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.

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4 5-19 ID N	0.5	- LTL O				
1. Entity ID Number	2. Exact name of the Limited Liability Company					
001733277	Anchors Away Travel, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
561500	Travel Agent					
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zip		
5 Casey Dr		Bristol	RI	02806		
7. Mailing Address of Limite	ed Liability Company and Name or Title	e of Contact Person				
Contact Name Kelly Furtado		Contact Title President				
Street Address 5 Casey Dr		City Bristol	State RI	^{Zip} 02809		
8. The Resident Agent info	rmation currently of record with the RI	Department of State is ac	curate. Changes require	e filing Form 642.		
	ry, i declare and affirm that i have ex tatements contained herein are true	• •	uding any accompany	ing schedules and		
Name of Authorized Person			Date	Date		
Kelly Furtado		03/12/2025				
Signature of Authorized Pe	rson					
KellyButado						

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MAIL TO:

Division of Business Services

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

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