RI SOS Filing Number: 202567	7439330 Date: 3/18/2025 3:43:0	00 PM
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State of Rhode Island	_	- 300
Department of State - Business	Services Division	ω_{ω}^{2}
Annual Report for the year: Limited Liability Company → Filing period: February 1 - May 1 → Filing Fee: \$50.00		:63 553 :-8:59:23
→ Penalty. Additional \$25.00 fee if form is not filed	i hv May 31	
	o by May 31.	
Entity ID Number 2. Exact name of the	Limited Liability Company	
1001499701 DNE	(Lange Se	ervices, LLC
3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island		
S6 720 x	(
5. State of Formation	nitorial Sur	vies
6. Principal Office Address	City _	State Zip
43 Salmon st # ?	202 DWV.	PJ (02905)
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name / Contact Title		
Johanny Diza	9/10 Contact Title	iost-
Street Address	77 77	tale Zip
45 Salmon JL # 201	Prou.	1471 OF 301
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	<u> </u>	11e U3.04 2027
Signature of Authorized Person		

MAIL TO:

Division of Business Services

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

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

FORM 632 - Revised 12/2023

FILED

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