RI SOS Filing Number: 202567567600 Date: 3/20/2025 10:56:00 AM



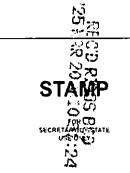
State of Rhode Island Department of State - Business Services Division

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.



1. Entity ID Number	2. Exact name of the Limited Liability Company			
001667103	T.MARTINS,LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
454110	INNACTIVE LLC			
5. State of Formation				
RI				
6. Principal Office Address		City	State	Zip
354 MOUNT PLEASANT AVENUE		PROVIDENCE	RI	02908
7. Mailing Address of Limited I	iability Company and Name or Tit	e of Contact Person	•	
Contact Name THEO MARTINS		Contact Title OWNER		
Street Address 354 MOUNT PLEASANT AVENUE		City PROVIDENCE	State RI	^{Zip} 02908
8. The Resident Agent informa	ition currently of record with the RI	Department of State is accurate	. Changes require	e filing Form 642.
	l declare and affirm that I have e ements contained herein are tru	• -	any accompany	ring schedules and
Name of Authorized Person			Date	
THEO MARTINS			3/14/2025	
Signature of Authorized Perso				

MAIL TO:

Division of Business Services

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

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