



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025
Limited Liability Company

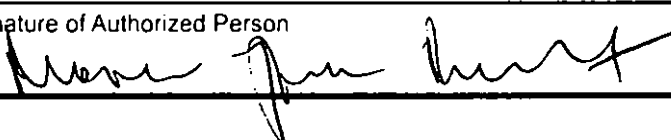
- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

**FILED
STAMP**

MAR 20 2025

CBN

BY 0474

1. Entity ID Number 001776781		2. Exact name of the Limited Liability Company SLT LLC		
3. NAICS Code 541511		4. Brief description of the character of business conducted in Rhode Island IT SERVICES		
5. State of Formation RI				
6. Principal Office Address 118 WHITTIER AVE		City PROVIDENCE	State RI	Zip 0297
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name MOISES PEREZ RAMIREZ		Contact Title PARTNER		
Street Address 118 WHITTIER AVE		City PROVIDENCE	State RI	Zip 02907
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 MOISES PEREZ RAMIREZ			Date 03/16/2025	
Signature of Authorized Person 				

MAIL TO:

Division of Business Services
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Website: www.sos.ri.gov