

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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	kite, El Gelikki (J. 504)

2. Exact name of the Limited Liability Company					
LOW COVER GUY LLC					
4. Brief description of the character of business conducted in Rhode Island					
independent auto Body replacing					
PROS					
	City	State	Zip		
· · · · · · · · · · · · · · · · · · ·	PAWILUCKE	R.I	02860		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Title					
APIL	City PAN LUCKP	State R	21p 02860		
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.					
		Date			
1UEZ		04-07	-2025		
Signature of Authorized Person					
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	LOW COVEY 4. Brief description of the character of the c	LOW COYCY GUY LLC 4. Brief description of the character of business conducted in Rhoc Independent Auto Brook PAULS City PAULUCK C chillity Company and Name or Title of Contact Person Contact Title City PAULUCK C City PAULUCK C Contact Title Ci	A. Brief description of the character of business conducted in Rhode Island INDUPED A CONTROL BOOK REPLACE City State PANTUCKE R. I solility Company and Name or Title of Contact Person Contact Title City PANTUCKE RI City PANTUCKE RI Contact Title City PANTUCKE RI CITY PANTUCKE		

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APR 07 2025

MAIL TO:

Division of Business Services

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