

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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1. Entity ID Number	2. Exact name of the Limited Liability Company				
001717760	KOSSI M K LOGISTICS LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
484121	DELIVERY AND TRANSPORTATION SERVICES				
5. State of Formation					
RI					
6. Principal Office Address		City	State	Zip	
37 MABEL STREET APT. 5		PAWTUCKET	RI	02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name KOSSI M KOUDADJE		Contact Title OWNER			
Street Address 37 MABEL STREET APT. 5		City PAWTUCKET	State RI	^{Zip} 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.					
Name of Authorized Person			Date	Date	
KOSSI M KOUDADJE			01/11/2025		
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 FILED

APR 08 2025