RI SOS Filing Number: 202569880950 Date: 4/11/2025 12:51:00 PM



## 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 Lia	bility Company		
801759270	Roth Love	Transper tat	ion LL	$\mathcal{L}$
3. NAICS Code	T	ter of business conducted in Rhoo	de Island	
5. State of Formation	TRansp	purtation		
6. Principal Office Address		City	State	Zip
332	doe st.	(ranston	127	02920
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name	5 Novas	Contact Title		
Street Address	st.	city Crawston	State	Zip 02920
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 (	Ruth Nova	8	Date 4/	1/1/25
Signature of Authorized Person				

FILED

MAIL TO:

Division of Business Services

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

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