RI SOS Filing Number: 202570068110 Date: 4/14/2025 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company <u>2025</u>

→ 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 Limite	ed Liability Company		<u> </u>	
1770 190 Klahs Family Enterprise LLC				
NAICS Code 4. Brief description of the character of business conducted in Rhode Island				
484121				
5. State of Formation				
RI Truckin	ч			
6. Principal Office Address	City	State	Zip	
142 Piave Or	Pawtucket	RI	02866	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name	Contact Title			
Philip Klah	Dyoner			
Street Address Playe Street	City	State	Zip	
	Familiache	<u> </u>	10/200	
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		
Philip Klah 04-14-25		4-25		
Signature of Authorized Person				
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FILED

APR 1 4 2025

MAIL TO:

Division of Business Services

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

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