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## State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2025

→ 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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APROD	
TIMATES	
79.00 20.00	
9:03 9:03	

1. Entity ID Number	2. Exact name of the Limited Lia	bility Company		
001754679	Evolution and land scaping and Construction (LC			
3. NAICS Code	4 Brief description of the character of husiness conducted in Rhode Island			
561730	Land scaping + Ruberton ( Besign			
5. State of Formation	1			
Rloade Island				
6. Principal Office Address	1	City	State	Zip
50 Rivernu	en Runs	Charlestown	RE	02813
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name	1	Contact Title		
Evan L Robu	1 tra	President		
Street Address	Λ ` .	Chy Charles Form	State	Zip
50 Reverve	w Much	Charlestown	RI	02813
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	
EVAN_	Roberts			
Signature of Authorized Person				

FILED

4,02

MAIL TO:

**Division of Business Services** 

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

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