

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					
001754679	Evolution and land scaping and Construction (LC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
561730	Land scaping + Ruberton (Besign					
5. State of Formation	•					
Rlode Ishur	•					
6. Principal Office Address	(City	State	Zip		
50 Rivernie	u Duice	Charlestown	RI	02813		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Evan L Roberts		Contact Title President				
Street Address 50 Reversee Deine		Chy clorks four	State RT	2ip 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

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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