



State of Rhode Island
Department of State - Business Services Division

2025

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.

FILED

APR 25 2025

BY

1. Entity ID Number 124624	2. Exact name of the Limited Liability Company SUPERSOLUTIONS, LLC			
3. NAICS Code 541519	4. Brief description of the character of business conducted in Rhode Island Computer Consulting			
5. State of Formation Rhode Island				
6. Principal Office Address 16 Cooper Street		City North Providence	State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Darryl Superczynski		Contact Title Member		
Street Address 16 Cooper Street		City North Providence	State RI	Zip 02904
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 Darryl Superczynski			Date	
Signature of Authorized Person <i>Darryl L. Superczynski</i>				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov