



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2025

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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R.I. DEPT. OF STATE  
BUS SVCS DIV

2025 APR 28 P 4: 02

1. Entity ID Number <b>001709946</b>		2. Exact name of the Limited Liability Company <b>COHEN YACHT SERVICES LLC</b>	
3. NAICS Code <b>238990</b>		4. Brief description of the character of business conducted in Rhode Island <b>REPAIR AND MAINTAIN PRIVATELY OWNED YACHTS UNDER 60'</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>16 CONGDON AVE</b>		City <b>NEWPORT</b>	State <b>RI</b>
		Zip <b>02840</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>AUSTIN E. COHEN</b>		Contact Title <b>OWNER</b>	
Street Address <b>16 CONGDON AVE</b>		City <b>NEWPORT</b>	State <b>RI</b>
		Zip <b>02840</b>	
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 <b>AUSTIN E. COHEN</b>		Date <b>4/23/2025</b>	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

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BY SCVVS  
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