RI SOS Filing Number: 202572840480 Date: 5/8/2025 4:00:00 PM

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1. Entity <u>OO 1</u> 3 NAIG	

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

Annual Report for the year: 2625
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						
001732806	bul Seyen Rental CCC						
3 NAIGO Code	Brief description of the character of business conducted in Rhode Island						
15311()	fail 15the						
5. State of Formation							
RI							
6. Principal Office Address	•	City	State	Zıp			
13 BINNEY St	<u> </u>	Deget	H	02840			
7 Mailing Address of Limited Lia	ability Company and Name or Title	of Contact Person					
Contact Name Contact Title							
LAVKEN H. C.	H. CAYSA Theosuer						
Street Address		City	State	Zıp			
SMHE							
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 ,				
hundles		5/1/25					
Signature of Authorized Person							
Lauren Corso							

MAIL TO:

**Division of Business Services** 

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

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