

State of Rhode Island

Department of State - Business Services Division

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

REC'D	
₹.ö.	
) RIDGS BSD / 8 PM12:11:46	
) :46	

1. Entity ID Number	2. Exact name of the Limited Liability Company					
001704682	EXCESS FUNDS LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
562920	ASSET BELWERY					
5 State of Formation						
AI						
6. Principal Office Address	a . + 1	City	State	Zip		
27.5 GADTTO.	AVAILED	PAWTUCKET	周工	DAS60		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name	Λ	Contact Title				
BEHA CAN	WHORT					
Street Address	1 1000 # 15	City /	State	Zip		
270 6/017	A AVEILLE"	autucke T	MI	00.860		
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	A .		Date / a	<i>f</i> 1-		
Betty J. Chawfold			5/8/	25		
Signature of Authorized Person						
(Satt to Called and						
) // /3-	- // Tr					

FILED

MAY 0 8 2025 R

MAIL TO:

Division of Business Services

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

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