



State of Rhode Island

## Department of State - Business Services Division

STAMP

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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RI. DEPT. OF STATE  
BUS. SVCS. DIV.

1. Entity ID Number <b>419047</b>	2. Exact name of the Limited Liability Company <b>TIENDA EL PAISANO, LLC</b>		
3. NAICS Code <b>445110</b>	4. Brief description of the character of business conducted in Rhode Island <b>PRODUCE DISTRIBUTION</b>		
5. State of Formation <b>RHODE ISLAND</b>			
6. Principal Office Address <b>928 PLAINFIELD STREET</b>		City <b>JOHNSTON</b>	State <b>RI</b>
		Zip <b>02919</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>ALVARO ORTEGA</b>		Contact Title <b>MANAGER</b>	
Street Address <b>246 DOUGLAS AVENUE</b>		City <b>PROVIDENCE</b>	State <b>RI</b>
		Zip <b>02908</b>	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
<i>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.</i>			
Name of Authorized Person <b>ALVARO ORTEGA</b>		Date <b>02/05/2025</b>	
Signature of Authorized Person <i>Alvaro Ortega</i>			

FILED  
MAY 13 2025  
BY ce 1905

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: [www.sos.ri.gov](http://www.sos.ri.gov)