

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:	2023
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 Liab	nility Company	_			
00/1667126	All-Brand New England LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
424400	4. Brief description of the character of business conducted in Rhode Island Distribute food and food related paper goods to the nursery school and adult day care					
5. State of Formation	- + + wirsery school and adult day care					
	TO THE MAISE TO					
Y	markel		State	Zip		
6. Principal Office Address		City	F/ [X]	01840		
250 Canal	St	Larrence	1/1/	0101		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Contact Title						
Grea Mil	iller Partner/Oviner					
	, (C.)	City	State	Zip 18,45		
Street Address	12/2	City N. Andoser	1,111	01010		
it the SI Department of State is accurate. Changes require filing Form 642.						
8. The Resident Agent information currently of record with the RI Department of Glate to Societies and accompanying schedules and 9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and 9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and						
Non-Ad-Authorized Person			Date 5/L	5/25		
Grea	Miller		1 ~1			
Signature of Authorized Person						
Signature of Addition to San 11 Mbs						
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MAY 16 2025

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Divisionant Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 632 - Revised: 12/20