

## State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year:	202	<u>ኢ</u>	
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.

REC'D'RIDOS BSD 75 MAY (16 AH 10:43:4
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1. Entity ID Number	2. Exact name of the Limited Liab	oility Company				
001667126	All-Brand Nexy 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	to the nursery school and addit day care					
MA	markel	<i></i>		<del></del>		
6. Principal Office Address	Miles Crear	City	State	D1840		
250 Canal	St	Larrence	X  \4	01070		
7 Mailing Address of Limited L	iability Company and Name or Title	of Contact Person				
Contact Name		Contact Title	>VINE.	. <u></u>		
Street Address Box	72/	City N. Anderser	State //	01845		
	4: au-ently of record with the RTL	Department of State is accurate. C	changes require t	iling Form 642.		
O II - I Ib f porture	l deciare and affirm that I have ex	amined this report, measing or	ny accompanyir	ig schedules and		
statements, and that all state	ements contained herein are true	and correct.	T			
Name of Authorized Person	Miller.		5/6	5/25 		
Signature of Authorized Perso						
	1.100-					

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

MAY 16 2025 1

FORM 632 - Revised: 12/2023