

3.7

State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 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 '25 KRY 19 AMS:28:03	STAMP	

1. Entity ID Number	2. Exact name of the Limited Liability Company						
001708252	Bwireless LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
811219	CELL PHONE REPAIR						
5. State of Formation							
RI							
6. Principal Office Address		City	State	Zip			
1363 BROAD STREET		PROVIDENCE	RI	02905			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name ALEJANDRO E. DUCOUDRAY		Contact Title PRESIDENT					
Street Address 1363 BROAD STREET		City PROVIDENCE	State RI	^{Z_{IP}} 02905			
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				
VINCENT LEVROS			04/29/2025				
Signature of Authorized Person							

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

MAY 1 9 2025

FORM 632 - Revised 12/2023