RI SOS Filing Number: 202573276260 Date: 5/19/2025 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2025

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

RECEIVED LICEPT. OF STATE LUS SVCS DAV

16 HAY 19 P 3: 52

| | | | 2. Exact name of the Limited Liability Company SKYVIEW EXTERIORS & REMODELING LLC | | |
|--|---|--|--|--|--|
| Brief description of the character of business conducted in Rhode Island ROOF REPLACING/REPAIR | | | | | |
| | | | | | |
| . <u> </u> | City | State | Zip | | |
| | PROVIDENCE | RI | 02920 | | |
| ability Company and Name or | Title of Contact Person | | | | |
| NARDO | Contact Title PRESIDENT | | | | |
| ST | City PROVIDENCE | State RI | ^{Zip} 02907 | | |
| ion currently of record with the | RI Department of State is accurate | : Changes require | e filing Form 642. | | |
| | | any accompany | ring schedules and | | |
| | | Date | | | |
| | | 5/16/25 | | | |
| | | • | | | |
| | NARDO ST ion currently of record with the declare and affirm that I have ments contained herein are t | PROVIDENCE Ability Company and Name or Title of Contact Person Contact Title PRESIDENT City PROVIDENCE ion currently of record with the RI Department of State is accurate declare and affirm that I have examined this report, including ments contained herein are true and correct. | PROVIDENCE RI PROVIDENCE RI PRESIDENT Contact Title PRESIDENT City PROVIDENCE State RI Ion currently of record with the RI Department of State is accurate. Changes require declare and affirm that I have examined this report, including any accompany ments contained herein are true and correct. Date 5/16/25 | | |

MAIL TO:

Division of Business Services

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

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

