

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

		and Charles Black Of	1			
→ Penalty: Additional \$25.00	i tee it torm is n	ot filed by May 31	.			
1. Entity ID Number	2. Exact name of the Limited Liability Company					
1760195	CLAY AND SONS STRVICES LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
488411)			(^		, \
5. State of Formation	AUTI	5 HAU	LPR (Tow	TRUC	(H)
6. Principal Office Address 44 Superiors Street Providence RC 0290-						zip 0290-7
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Henry P. Clay			Contact Title			
Street Address 44 Superior Street				dence	State	2ip 02907
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	+ Pi	Clar	^A		Date 0	0/2025
Signature of Authorized Person	7		$\overline{\bigcirc}$			

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 (155 MAY 2 0 2025

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