

## State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2025
Limited Liability Company

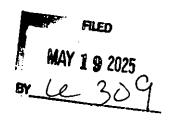
-> Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

, RECEIVED	STAMP		
RECEIVED 1. DEPT. OF ST.	The second of the second		
6 11AY 19 P 3:	52		

1. Entity ID Number	2. Exact name of the Limited Liability Company			
00 172 5079	Ellite Aconstruit Collings LLC.			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
238990	Acoustical Cellins Installation			
5. State of Formation				
R.I.				
6. Principal Office Address		City	State	Zip
15 June st.	:	Particlet	RF	02860
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Contact Title				
Milu E. Pernandez Owner, Officer Director.  Street Address  1 Jane 14 Pawturket RT 02860				
Street Address / T Jane	st	City Pawturket	State CT	2ip 02860
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	2 i		Date	
	MILL E. Ferna	nder	5-1	6-25
Signature of Authorized Person  Mh C- /				



MAIL TO:

**Division of Business Services** 

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

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