RI SOS Filing Number: 202573365720 Date: 5/21/2025 10:00:00 AM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024 **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.

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1. Entity ID Number	2. Exact name of the Limited Li	2. Exact name of the Limited Liability Company			
001669810	91st Street LLC				
3. NAICS Code 336612	Brief description of the character of business conducted in Rhode Island Boat building				
5. State of Formation RI				.:*	
6. Principal Office Address		City	State	Zip	
112 JT Connell Memorial Boulevard		Newport	RI	02840	
7. Mailing Address of Limite	ed Liability Company and Name or Title	e of Contact Person			
Contact Name James Thompson		Contact Title President			
Street Address 112 JT Connell Memorial Boulevard		City Newport	State RI	^{Zip} 02840	
8. The Resident Agent info	mation currently of record with the RI	Department of State is accu	urate. Changes requi	re filing Form 642.	
	ry, I declare and affirm that I have extatements contained herein are true		ding any accompan	ying schedules and	
Name of Authonzed Persor			Date	11010	
James Thompson			>	119125	
Signature of Authorited Pe	rson		,	, ,	

MAIL TO:

Division of Business Services

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

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

FORM 632 - Revised: 12/2023