RI SOS Filing Number: 202574305220 Date: 6/2/2025 4:00:00 PM



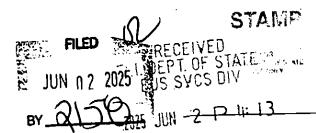
Department of State - Business Services Division

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.



1. Entity ID Number 001718214	2. Exact name of the Limited Liability Company CHACON RESTAURANT, LLC			
3. NAICS Code7225115. State of Formation	4. Brief description of the character of business conducted in Rhode Island TO OPERATE A RESTAURANT AND BAR OPEN TO THE PUBLIC TO OWN AND LEASE REAL ESTATE AND ALL ALLIED AND RELATED BUSINESSES THERETO			
RHODE ISLAND				
6. Principal Office Address 743 PUTNAN PIKE		City GREEVILLE	State RI	Zip 02828
7. Mailing Address of Limite	d Liability Company and Name or Tit	le of Contact Person		
Contact Name LUZ CHACON		Contact Title MANAGER		
Street Address 132 PUTNAN STREET		City PROVIDENCE	State RI	^{Zip} 02909
8 The Resident Agent infor	mation currently of record with the R	Department of State is accurate	e. Changes requir	e filing Form 642.
Under penalty of periury.	l declare and affirm that I have exa tatements contained herein are tru	mined this report, including a	ny accompanyin	g schedules and
Name of Authorized Person			Date 12/26/2024	
Signature of Authorized Per	rson			

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

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