RI SOS Filing Number: 202574529130 Date: 6/12/2025 3:17:00 PM



State of Rhode Island Department of State - Business Services Division

→ 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 Liability Company							
(1009100	Analiyans Services LUC							
3. NAICS Code	Brief description of the character of business conducted in Rhode Island							
5617a0								
5. State of Formation		•	1.					
RI	maintena - St	ance	/Janit	orial				
6. Principal Office Address		City		State	Zip	1		
Leo Chestnut	- S+ .	Cent	ral Falls	RI	0286	3		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person								
Contact Name		Contact Title				1		
Jessicy K	estrepo		wher					
Street Address (AC) Chestrut St		City	as I Talk	State	Zip	-		
000 (100)111	Cert	MI Tail	R.L.	10980	<u>:</u> ろ			
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	`			Date	1			
Jessica 1	lestrepo	· 		10/2	1202	<u>5 </u>		
Signature of Authorized Person								
	~~ } / ~ / ~ / ~ / ~ / ~ / ~ / ~ / ~ / ~							

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

BY 1 P 2025

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FORM 632 - Revised: 12/2023