

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 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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SIAMI:

Entity ID Number	2. Exact name of the Limited	2. Exact name of the Limited Liability Company			
001335485	MARTA MAYORGA, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
561720	CLEANING SERVICES				
5 State of Formation					
RI					
6. Principal Office Address		City	State	Zip	
223 UNION AVENUE		PROVIDENCE,	RI	02909	
7 Mailing Address of Limited	Liability Company and Name or	Title of Contact Person		•	
Contact Name MARTA A. GUILAR GARCIA		Contact Title			
Street Address 233 UNION AVE		City PROV	State RI	^{Zip} 02909	
8. The Resident Agent inform	nation currently of record with the	RI Department of State is accura	te. Changes requir	e filing Form 642.	
	, I declare and affirm that I have stements contained herein are	e examined this report, includir true and correct.	g any accompany	ring schedules and	
Name of Authorized Person			Date		
MARTA A. GUILAR O	SARCIA				
Signature of Authorized Pers	onlar G.				

MAIL TO:

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

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

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FORM 632 - Revised 12/2023