RI SOS Filing Number: 202326120530 Date: 1/18/2023 4:00:00 PM



Department of State - Business Services Division

Annual Report for the year: $\frac{2023}{}$ **Limited Liability Company**

JAN 1 8 2023

- → Filing period: February 1 May 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by May 31.

Signature of Authorized Per	Turna Mu			•
THOMAS C MRVA			1/13/23	
Under penalty of perjury, statements, and that all s Name of Authorized Person	I declare and affirm that I have ex tatements contained herein are tr	amined this report, including an ue and correct.	y accompanyin	g schedules and
8. The Resident Agent infor	mation currently of record with the F	RI Department of State is accurate	. Changes require	e filing Form 642.
Street Address 1130 IRON MINE HILL RD		City N SMITHFIELD	State RI	^{Z_{ip}} 02896
Contact Name THOMAS C MRVA		Contact Title Member		
7. Mailing Address of Limite	ed Liability Company and Name or T			
6 BLACKSTONE VALLEY PLACE STE 205		LINCOLN	RI	02865
6. Principal Office Address		City	State	Zip
5. State of Formation				
3. NAICS Code	4. Brief description of the cha REMODELING	Brief description of the character of business conducted in Rhode Island REMODELING		
1. Entity ID Number 001729743	2. Exact name of the Limited Liability Company THREE FINGER REMODELING LLC			

MAIL TO:

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

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