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## State of Rhode Island and Providence Plantations Department of State - Business Services Division

Annual Report for the year: 2016
Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- -> Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company						
000853527	South County Auto, LLC						
3. NAICS Code 窓にしらぐ 5. State of Formation RI	Brief description of the character of business conducted in Rhode Island     Vehicle Repair						
6. Principal Office Address 17 Industrial Drive			City Westerly	State RI	Zip 02891		
7. Mailing Address of Limited Lia	ability Company	and Name or Tit	le of Contact Person				
Contact Name Phillip Allen			Contact Title				
Street Address 17 Industrial Drive			City Westerly	State RI	<sup>Zip</sup> 02891		
8. List ALL managers (names a	nd addresses) o	f the Limited Lial	bility Company, IF APPLICA	BLE - DO NOT LIST N	MEMBERS		
Manager Name Mark P Allen			Manager Name Phillip Allen				
Street Address 635 SW Salerno Road			Street Address 102 Riverside Drive				
City Stuart	State FL	<sup>Zip</sup> 34997	City Pawcatuck	State CT	<sup>Zip</sup> 06379		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	·			Check the box to in	dicate an attachment		
9. Resident Agent in Rhode Islan	nd. This information	on is currently of re	cord with the Department of Sta	te. Changes require filing	g Form 642.		
Under penalty of perjury, I dec statements, and that all staten	lare and affirm nents contained	that I have exa d herein are true	mined this report, including and correct.	g any accompanying	schedules and		
Name of Authorized Person				Date			
Phillip Allen				9/23/16			
Signature of Authorized Person	·	SIGN DO	CUMENT HERE				

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 SEP 2 9 2016

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