RI SOS Filing Number: 201609851310 Date: 10/04/2016 2:47 PM

State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: 2016

1. ID No. 000225279

2. Exact Name of the Limited Liability Company Landmark Auto, LLC

3. State of Formation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 6 44

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

THE LLC REGITERED IN RHODE ISLAND AT THIS STAGE CONDUCTS ITS BUSINESS IN TEXAS. IT IS A RETAILER OF USED CARS .WE PROCURE USED VEHICLES FROM VARIOUS SOURCES AND SELL THEM,MANY OF WHICH ARE FINANCED IN HOUSE,TO CLIENTS WHO HAVE A CHALLENGED CREDIT HISTORY AND ASSIST THEM IN FINANCING VEHICLES FOR THEM.THE ADDRESS OF THE TEXAS OFFICE IS :699 E SH121 BUSINESS LEWISVILLE TX 75057

5. Principal Office Address

No. and Street: 37 HARRISON AVE
City or Town: NEWPORT State: RI Zip: 02840 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: MARK HOWARD Contact Title:
No. and Street: 4551 RED ROCK LANE
City or Town: FLOWERMOUND State: TX Zip: 75022 Country: USA

0-4843-0

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	MARK D HOWARD	4551 RED ROCK LN FLOWER MOUND, TX 75057 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

GIUSEPPE SCAGLIRINI, ESQ. 37 HARRISON AVENUE NEWPORT , RI 02840

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 4 Day of October, 2016 at 2:50:04 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MARK HOWARD
Signature of Authorized Person

Form No. 632
Revised 09/07