RI SOS Filing Number: 201744783370 Date: 6/5/2017 4:00:00 PM

State of Rhode Island and Providence Plantations Department of State - Business Services Division	<u></u>
Annual Report for the year:	
→ Filing period: September 1 - November 1	
→ Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by December 1.	

4 Entitle ID Number			Little Access				
1. Entity ID Number	2. Exact name of the Limited Liability Company						
1335518	Woods Van Duren LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
48-49	Interstate Transportation of automobiles						
5. State of Formation	The specific of the specific o						
R.T.							
6. Principal Office Address	\wedge	10 10	City	State	Zip		
136 Arbor	or Drive		Providence	7.I.	02908		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name	Y		Contact Title				
Street Address	<u> FOX</u>		Quoel				
136 A		ile	City Providence	State L.T.	Zip 02908		
	nd addresses) of	the Limited Liabi	lity Company, IF APPLICABLE - D	O NOT LIST ME	MBERS		
Manager Name	nager Name Manager Name						
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an attachment							
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
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			
	Joe Fox			5/31-17			
Signature of Authorized Person							
\$IGN DOCUMENT 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

JUN 0 5 2017