s s	tate of Rhode Island and Pr Office of the Secret		Fee: \$50.
	Division Of Busines 148 W. River S Providence RI 029	Street	
HOPE	(401) 222-30		
imited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability con in thirty (30) days after the time pres penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>001662833</u>	3		
2. Exact Name of the Li	mited Liability Company <u>LJE Au</u>	to Sales, LLC	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
the list of codes <u>here.</u> More	e information on <u>NAICS</u> can be found	l online.	
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in RI	node Island
SALE AND SERVICIN	G OF MOTOR VEHICLES		
5. Principal Office Addre	SS		
	<u>FAUNTON AVENUE</u> <u>T PROVIDENCE</u> St	ate: <u>RI</u> Zip: <u>02914</u> Cou	ntry: <u>USA</u>
5. Mailing Address of Li	nited Liability Company and Nam	e or Title of Contact Person:	
Contact Name: Contact	Title:		
	AUNTON AVENUE	te: RI zip: 02914 Cou	ntry: USA
·	Each Manager of the Limited Lia		
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip	Code, Country
MANAGER	JONATHAN STERN	9 WRIGHTS MILL ARMANK , NY 10504 U	
MANAGER	EDWARD D K	9 STONES THROW	

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

CHRISTOPHER DIAZ 21 BELGRADE AVENUE PAWTUCKET, RI 02861

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

Signed this 16 Day of November, 2017 at 12:44:00 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 <u>SUSAN A. WOODS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved