RI SOS Filing Number: 201879615270 Date: 10/17/2018 4:00:00 PM



FILED

OCT 17 2018

Annual Report for the year: 2018 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 000089590	1		ed Liability Company rn of Rhode Islan	d, LLC		
3. NAICS Code	4. Brief de	scription of the c	haracter of business conducted	in Rhode Island		
441310	Wholesale	Wholesale and retail tire sale and motor vehicle service.				
5. State of Formation						
RI			•		····	
6. Principal Office Address			City	State	Zip	
80 Public Street			Providence	RI	02905	
7. Mailing Address of Limit	ed Liability Compa	any and Name o		. 4		
Contact Name Peter Gerry			Contact Title Member			
Street Address 80 Public Street			City Providence	State RI	^{Zip} 02905	
8. List ALL managers (nar	mes and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		I		Check the box to	indicate an attachment	
9. Resident Agent in Rhod	e Island. This inforr	mation is currently	of record with the Department of Sta	ite. Changes require fitii	ng Form 642.	
Under penalty of perjury, statements, and that all s			examined this report, including true and correct.	ig any accompanyin	ng schedules and	
Name of Authorized Person Per Lev Cranty 1 / 2				Date	1/8/18	
Signature of Authorized Pe	erson L	X 9	Lovy They			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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