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FOR SECRETARY OF STATE USE ONLY

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 Dece	ember 1.			
1. Entity ID Number	2. Exact name of the Limited Liability Company					
788136	ARNOLD AUTO SERVICE, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
B1112 PI	AUTO REPAIR					
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
68 ARNOLD STREET			WOONSOCKET	RI	02895	
7. Mailing Address of Limited Lia	bility Company	and Name or Tit				
Contact Name FELIX NAVARRO			Contact Title MANAGER			
Street Address 10 EIGHTH AVENUE			City WOONSOCKET	State RI	Zip 02895	
8. List ALL managers (names ar	nd addresses)	of the Limited Lia	bility Company, IF APPLICABLI	- DO NOT LIST I	MEMBERS	
Manager Name FELIX NAVARRO		Manager Name				
Street Address 10 EIGHTH AVENUE		Street Address				
City WOONSOCKET	State RI	Zip 02895	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Islan	nd. This informa	tion is currently of re	ecord with the Department of State.	Changes require filin	g Form 642.	
Under penalty of perjury, I dec statements, and that all staten				any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
FELIX NAVARRO			02/21/2	02/21/2019		
Signature of Authorized Person	sales)	, SIGN DO	OCUMENT 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 FEB 2 5 2019 C