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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: 2020 1. ID No. 000968897 2. Exact Name of the Limited Liability Company WOONSOCKET AUTO SALVAGE LLC 3. State of Formation State: RI ARTICLE III Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 441310 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island AUTO WRECKING/SALVAGE 5. Principal Office Address No. and Street: <u>5 MADISON AVE</u> City or Town: WOONSOCKET State: RI Zip: 02895 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: LARRY LEFEBYRE Contact Title: No. and Street: <u>5 MADISON AVE</u> City or Town: WOONSOCKET State: RI Zip: 02895 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: LARRY LEFEBYRE Contact Title: No. and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS Title Individual Name Address					
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DO NOT LIST MEMBERS Title Individual Name Address	City or Town: WC	DONSOCKET State: <u>RI</u>	Zip: <u>02895</u>	Country: <u>USA</u>	
		-	bility Company, if A	applicable.	
First, Middle, Last, Suffix Address, City or Town, State, Zip Code, Country	Title	Individual Name	A	ddress	
		First, Middle, Last, Suffix	Address, City or Tow	vn, State, Zip Code, Country	
	8. RESIDENT AGENT IN I	RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

LARRY LEFEBVRE 5 MADISON AVENUE WOONSOCKET, RI 02895

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

Signed this 27 Day of October, 2020 at 8:51:32 AM 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 LARRY LEFEBVRE

Signature of Authorized Person

Form No. 632 Revised 09/07

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