



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2020

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.

FILED

OCT 26 2020

BY

1. Entity ID Number 151490		2. Exact name of the Limited Liability Company CaPi, LLC			
3. NAICS Code UB320		4. Brief description of the character of business conducted in Rhode Island To act as an Auto Repair Center			
5. State of Formation RI					
6. Principal Office Address 471 George Waterman Road			City Johnston	State RI	Zip 02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Carl Shewcov			Contact Title Member		
Street Address 45 Serrell Sweet Road			City Johnston	State RI	Zip 02919
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name N/A			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 <input type="checkbox"/>					
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 Carl Shewcov				Date 10/19/2020	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov