



State of Rhode Island
Department of State - Business Services Division

FILED STAMP

Annual Report for the year: 2020
Limited Liability Company

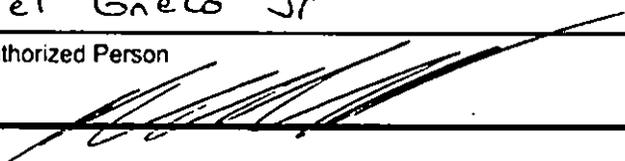
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FOR ANY OTHER USES
USE ONLY
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- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <u>001684770</u>		2. Exact name of the Limited Liability Company <u>Grieco Hyundai LLC</u>	
3. NAICS Code <u>441110</u>		4. Brief description of the character of business conducted in Rhode Island <u>Automotive Sales</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>1890 Hartford Ave</u>		City <u>Johnston</u>	State <u>RI</u>
		Zip <u>02919</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Ariisa Recupero</u>		Contact Title <u>office manager</u>	
Street Address <u>1890 Hartford Ave</u>		City <u>Johnston</u>	State <u>RI</u>
		Zip <u>02919</u>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name		Manager Name	
Street		Street Address	
City		City	State
		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City		City	State
		Zip	
Check the box to indicate an attachment <input type="checkbox"/>			
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
<i>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.</i>			
Name of Authorized Person <u>Michael Grieco Jr</u>			Date <u>10/28/2020</u>
Signature of Authorized Person 			

MAIL TO:
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