



State of Rhode Island
Department of State - Business Services Division

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BUS SVCS DIV
2021 OCT 18 AM 8:36

Annual Report for the year: 2021
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 <u>001689466</u>		2. Exact name of the Limited Liability Company <u>A and L Garage Doors LLC</u>	
3. NAICS Code <u>81149</u>		4. Brief description of the character of business conducted in Rhode Island <u>Installation and repair of garage doors.</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>15 Teakwood dr.</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>Ariel Yitzchak</u>		Contact Title <u>owner</u>	
Street Address <u>15 Teakwood dr</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 <u>N/A</u>		Manager Name <u>N/A</u>	
Street Address		Street Address	
City	State	Zip	City
Manager Name <u>—</u>		Manager Name <u>—</u>	
Street Address		Street Address	
City	State	Zip	City
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.			
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 <u>Ariel Yitzchak</u>			Date <u>10/15/21</u>
Signature of Authorized Person <u>[Signature]</u>			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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