



State of Rhode Island
Department of State - Business Services Division

FILED
 STAMP
 DEC 15 2021
 BY *[Signature]*

Annual Report for the year: 2022
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 001705776		2. Exact name of the Limited Liability Company Michael's Auto Sales, LLC			
3 NAICS Code 423110		4. Brief description of the character of business conducted in Rhode Island AUTO SALES			
5. State of Formation RI					
6. Principal Office Address 3 TAG DRIVE		City NORTH PROVIDEN CE	State RI	Zip 02911	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MICHAEL PETRARCA		Contact Title			
Street Address 3 TAG DRIVE		City NORTH PROVIDENCE	State RI	Zip 02911	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		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. 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 MICHAEL PETRARCA				Date	
Signature of Authorized Person					

MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov