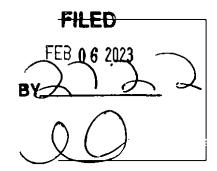


Annual Report for the year: $\frac{2023}{}$ **Limited Liability Company**

→ Filing period: February 1 - May 1 → Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.



1. Entity ID Number 001705778	Exact name of the Limited Liability Company D&M Auto Rentals, LLC			
3. NAICS Code 532111 5. State of Formation RI	4. Brief description of the character of business conducted in Rhode Island PROVIDING SUBSTITUTE TRANSPORTATION FOR CLIENT WHOM VEHICLES ARE IN SHOP BEING REPAIRED			
6. Principal Office Address 3 TAG DRIVE		City NORTH POVIDENCE	State RI	Zip 02911
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person	1	
Contact Name MICHAEL P PETRARCA		Contact Title OWNER		
Street Address 3 TAG DRIVE		City NORTH PROVIDENCE	State RI	Zip ()2911
8. The Resident Agent infon	mation currently of record with ti	he RI Department of State is accurate. (L Changes requir	e filing Form 642.
	declare and affirm that I have atements contained herein ar	e examined this report, including any retrue and correct.	accompanyin	g schedules and
Name of Authorized Person		Date		
MICHAEL P PETRARCA				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov