



**State of Rhode Island
Department of State - Business Services Division**

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Annual Report for the year: 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 1695224 | | 2. Exact name of the Limited Liability Company Vehicle Leasing Associates, LLC | | | |
| 3. NAICS Code 532112 | | 4. Brief description of the character of business conducted in Rhode Island Lease vehicles | | | |
| 5. State of Formation Connecticut | | | | | |
| 6. Principal Office Address 333 South Broad Street | | City Meriden | State CT | Zip 06450 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name Clement A. Brancale | | | Contact Title Managing Member | | |
| Street Address 333 South Broad Street | | City Meriden | State CT | Zip 06450 | |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | | | |
| 9. 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 Clement A. Brancale | | | Date 2/5/2024 | | |
| Signature of Authorized Person <i>Clement A. Brancale</i> | | | | | |

FILED

FEB 21 2024
BY 53E75
A.A. 12:45 PM.

MAIL TO:
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