

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

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	Exact name of the Limited Liability Company Vehicle Leasing Associates, LLC Brief description of the character of business conducted in Rhode Island			
1695224				
3. NAICS Code				
532112	Lease vehicles			
5. State of Formation				
Connecticut				
6. Principal Office Address	-!	City	State	Zip
333 South Broad Street		Meriden	СТ	06450
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person		
Contact Name Clement A. Brancaie		Contact Title Managing Member		
Street Address 333 South Broad Street		City Meriden	State CT	^{Zip} 06450
8. The Resident Agent informa	ation currently of record with t	he RI Department of State is acc	urate. Changes require	e filing Form 642.
9. Under penalty of perjury, statements, and that all state		ave examined this report, inclure true and correct.	ding any accompany	ing schedules and
Name of Authorized Person			Date	
Clement A. Brancale			2/5/2024	
Signature of Authorized Derso	Viciole			

FILED

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MAIL TO:

Division of Business Services

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