

State of Rhode Island Department of State - Business Services Division

FILED

Annual Report for the year: Limited Liability Company

2025

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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



4 F-8-15 N	los i za i a				
1. Entity ID Number	2. Exact name of the Limited Liability Company				
1681942	1826 Elmwood Avenue LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
811198	General automotive repair and maintenance				
5. State of Formation					
Rhode Island					
6. Principal Office Address	i	City	State	Zip	
1826 Elmwood Avenue		Warwick	RI	02888	
7. Mailing Address of Limite	d Liability Company and Name or 1	Fitle of Contact Person	<u> </u>		
Contact Name		Contact Title			
Thomas S. Hemmendinger, Esq.		Attorney			
Street Address 362 Broadway		City Providence	State RI	^{Zip} 02909	
8. The Resident Agent infor	mation currently of record with the I	RI Department of State is accura	ate. Changes require	e filing Form 642.	
	y, I declare and affirm that I have atements contained herein are to		ng any accompany	ing schedules and	
Name of Authorized Person			Date		
Michael Gill			2/18/25		
Signature of Authorized Per	son				
Muchael	Gill				

MAIL TO: -

Division of Business Services

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

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