




State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025
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.

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|---|--|---|--------------------|
| 1. Entity ID Number <u>001745138</u> | | 2. Exact name of the Limited Liability Company <u>MEMOR MOTORS LLC</u> | |
| 3. NAICS Code <u>81111</u> | | 4. Brief description of the character of business conducted in Rhode Island <u>Auto Repair</u> | |
| 5. State of Formation <u>RI</u> | | | |
| 6. Principal Office Address <u>195 Admiral Kalbfus Rd Apt 16A</u> | | City <u>Newport</u> | State <u>RI</u> |
| | | Zip <u>02840</u> | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name <u>Joel Muralles</u> | | Contact Title <u>Owner</u> | |
| Street Address <u>195 Admiral Kalbfus Rd Apt 16A</u> | | City <u>Newport</u> | State <u>RI</u> |
| | | Zip <u>02840</u> | |
| 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 <u>Joel Muralles</u> | | Date <u>3/14/25</u> | |
| Signature of Authorized Person  | | | |

FILED

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BY 21N2V
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MAIL TO:

Division of Business Services
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