



State of Rhode Island

Department of State - Business Services Division

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USE ONLYAnnual 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 001692489		2. Exact name of the Limited Liability Company CAJ, LLC	
3. NAICS Code 811111		4. Brief description of the character of business conducted in Rhode Island AUTO REPAIR & MAINTENANCE	
5. State of Formation RHOD ISLAND			
6. Principal Office Address 100 RESERVOIR AVENUE		City PROVIDENCE	State RI
		Zip 02907	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name JOEL JIMENEZ JIMENEZ		Contact Title MANAGER	
Street Address 89 NORFOLK STREET		City CRANSTON	State RI
		Zip 02910	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
<i>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.</i>			
Name of Authorized Person JOEL JIMENEZ		Date 12/26/2024	
Signature of Authorized Person X JOEL JIMENEZ			

FILED

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BY 61248

MAIL TO:

Division of Business Services

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