RI SOS Filing Number: 201183051870 Date: 09/16/2011 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 • **Filing Fee:** $50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of $25.00.

1. ID No.	2. Exact name of the limited liability company
119585	JT Holding, LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RHODE ISLAND	Acquire, own, operate, manage, maintain, lease, develop and sell property

5. Principal office address	City	State	Zip
62 Airport Road	Westerly	RI	02891

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
John Strafach, Jr.	Manager

Street Address	City	State	Zip
62 Airport Road	Westerly	RI	02891

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐

Manager Name	Manager Name
Anthony Strafach	John Strafach, Jr.
Street Address	Street Address
93 Rowley Drive	26 Seabury Lane
City / State / Zip	City / State / Zip
Stonington / CT / 06378	Westerly / RI / 02891
Manager Name	Manager Name
Street Address	Street Address
City / State / Zip	City / State / Zip

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11

Agent Name	Address
Andrew W. Davis	
Address	**City / Zip**
101 Dyer Street	Providence 02903

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This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

[redacted]

FILED
File Date
Check No. SEP 16 2011
By: BY 152155
FOR SECRETARY OF STATE USE ONLY
67701-12-595463

[redacted]

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.

Signature of Authorized Person — *Date* 9/8/2011

John Strafach, Jr.
Print or Type Name of Authorized Person

Form 632 Rev. 07/07