

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.		ne of the limited liab				
146639	Jawharji	Jawharjian Law Offices, LLC				
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island				
RI	Legal Se	Legal Services				
5. Principal office address 2013 Plainfield Pike			City Johnston	State RI	Zip 02919	
	MITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:		
Contact Name Hagop S. Jawharjian			Contact Title Member			
Street Address 2013 Plainfield Pike			City Johnston	State RI	Zip 02919	
7. LIST <u>ALL</u> MANAGERS (NA ("X" BOX FOR ATTACHME	AMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, I	F APPLICABLE - <u>Do</u>	NOT LIST MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	 		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
B. RESIDENT AGENT IN RHO	DE ISLAND					
his information is currently	of record in the	Office of the Secr	etary of State. Changes require	filing Form 642.		
) 	FILED OCT 0 6 2014			
File Date Check No			Under penalty of per this report, including and that all statemen Signature of Authorize	any accompanying to contained herein a	ikm that I have examined schedules and statements are true and correct. 10/02/2014 Date	
FOR SECRETARY OF STAT			Hagop S. Jawha Print or Type Name of	<u> </u>		

Form No. 632 Revised: 01/2012