

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2015

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.	2. Exact nam	e of the limited liabil	lity company			
683003	JIMENEZ	HOLDING LLC	;			
003003			Dhada	laland		
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island PROPERTY HOLDING					
RI	PROPER	I I HOLDING				
5. Principal office address 981 BROAD ST.			PROVIDENCE	State RI	Zip 02905	
SAME TO STATE OF THE SERVE	ALIUMAN LAURUT	COMPLEYAND	VANE OBSTITE FEORIACTED		Name of the Control o	
Contact Name JUAN JIMENEZ			Contact Title VICE -PRESIDENT	VICE -PRESIDENT		
Street Address 65 KINFIELD ST.			City PROVIDENCE	State RI	Zip 02909	
		HEBES OF THE	IMITEO CABILITY COMPANY IF	APPLICABLE - DO		
Manager Name			Manager Name		28. SE	
Street Address			Street Address		CRE ORP	
City	State	Zip	City	State	ECE TAR DRAI	
Manager Name			Manager Name		PR I	
Street Address			Street Address	Street Address		
City	State	Zip	City	State	ZipV 171	
8. RESIDENT AGENT IN	enone de l'alonge.		and the second property and the	i pesti i di i		
This information is curre	ently of record in th	e Office of the Sec	retary of State. Changes require f	iling Form 642.	· · · · · · · · · · · · · · · · · · ·	

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Form No. 632 Revised: 01/2012

Under penalty of perjury I declare and alfirm 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

JUAN JIMENEZ

Print or Type Name of Authorized Person