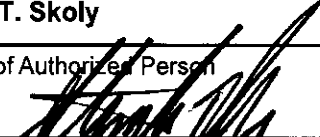




State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

**Annual Report for the year:** 2016  
**Limited Liability Company**

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <b>331075</b>		2. Exact name of the Limited Liability Company <b>JawDoc Productions, LLC</b>			
3. State of Formation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Movie production.</b>			
5. Principal Office Address <b>30 Chapel View Boulevard Suite 240</b>			City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Stephen J. DiGianfilippo, Esq.</b>			Contact Title <b>Attorney</b>		
Street Address <b>50 Park Row West, Suite 111</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>Stephen T. Skoly</b>			Manager Name		
Street Address <b>30 Chapel View Boulevard Suite 240</b>			Street Address		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
8. Resident Agent in Rhode Island. This information is currently of record in the Department of State. 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 <b>Stephen T. Skoly</b>				Date <b>10-20-16</b>	
Signature of Authorized Person 			SIGN DOCUMENT HERE		

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**  
**APR 13 2017**  
 BY 11820  
