s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	treet	
HOPE	(401) 222-30	40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>000140904</u>			
2. Exact Name of the Limited Liability Company <u>JEWELRY APPRAISAL SERVICES LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of business in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification <u>click here.</u>			
NAICS Code		6 44831	<u>0</u>
4. Brief Description of th	e Character of the Business Which	n is Actually Conducted in Rhod	le Island
5. Principal Office Addre	SS		
No. and Street: <u>1865 POST ROAD, SUITE 109</u>			
City or Town: WAR	WICK	State: <u>RI</u> Zip: <u>02886</u> Count	ry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street:1865 FCity or Town:WARV	P <u>OST ROAD, SUITE 109</u> VICK S	State: <u>RI</u> Zip: <u>02886</u> Count	try: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Coo	le, Country
MANAGER	JOHN ACHESON	1865 POST ROAD, SUIT	E 109

WARWICK, RI 02886- USA

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

NEW ENGLAND DIAMOND COMPANY LLC 1865 POST ROAD, SUITE 109 WARWICK, RI 02886

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

Signed this 31 Day of August, 2017 at 2:39:54 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By JOHN ACHESON

Signature of Authorized Person

Form No. 632 Revised 09/07

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