s s	tate of Rhode Island and F Office of the Secre		ns Fee: \$50.00
HOPE	Division Of Busin 148 W. Rive Providence RI 0 (401) 222-	• Street 2904-2615	
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
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.			
ANNUAL REPORT YEAR: 2017			
1. ID No. <u>001677016</u>			
2. Exact Name of the Limited Liability Company <u>JLM Consulting LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>541618</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
CAREER COACHING			
5. Principal Office Address			
	IANN SCHOOL RD IHFIELD S	tate: <u>RI</u> Zip: <u>02917</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
No. and Street: 78 M	ANN SCHOOL RD	<u>/NER</u> 	Country: USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name First, Middle, Last, Suffix		ress State, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JESSICA MENCUNAS 78 MANN SCHOOL RD SMITHFIELD, RI 02917

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

Signed this 18 Day of October, 2017 at 12:34:05 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 JESSICA MENCUNAS

Signature of Authorized Person

Form No. 632 Revised 09/07

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