Annual Report for the year:	2017	
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 149295	2. Exact name of the Limited Liability Company NIALJA, LLC					
3. NAICS Code 3. 11 5. State of Formation Rhode Island	Brief description of the character of business conducted in Rhode Island Real Estate Holding					
Principal Office Address Scituate Avenue	 		City Johnston	State RI	Zip 02919	
7. Mailing Address of Limited Lia		any and Name o	r Title of Contact Person	•		
Contact Name John R. Restivo			Contact Title			
Street Address 295 Scituate Avenue			City Johnston	State RI	^{Žip} 02919	
8. List ALL managers (names ai	nd addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Islan	nd This inform	nation is currently	of record with the Department of Sta	ate. Changes require filir	ng Form 642.	
Under penalty of perjury, I dec statements, and that all staten				ng any accompanyin	g schedules and	
Name of Authorized Person John Restivo, Jr. Date 10217						
Signature of Authorized Person	/20	M	infrier -			
	-//	7. 4. 600				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

