



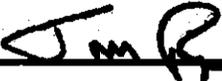
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED
 R.I. DEPT. OF STATE
 BUSINESS DIV

2017 NOV 14 PM 12:46

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 877705		2. Exact name of the Limited Liability Company JNB, LLC			
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island ANY LAWFUL BUSINESS <i>Real Estate</i>			
5. State of Formation RHODE ISLAND					
6. Principal Office Address C/O ROBINSON & COLE LLP, ONE FINANCIAL PLAZA		City PROVIDENCE	State RI	Zip 02903	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name ROGER A. PETERS, II, ESQ.			Contact Title		
Street Address ONE FINANCIAL PLAZA, SUITE 1430		City PROVIDENCE	State RI	Zip 02903	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name NONE		Manager Name			
Street Address		Street Address			
City	State	Zip	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"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
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.					
Name of Authorized Person THOMAS M. RYAN				Date <i>11/6/2017</i>	
Signature of Authorized Person 					

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

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 BY *[Signature]* 0317472