2001

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAGE

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 1056023	Exact name of the Limited Liability Company C.J.P. Enterprises, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
5. State of Formation RI	LAWN Fertilizer					
6. Principal Office Address			City	State	Zıp	
10 JUNIPER LANE			Johnston	RI	02919	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Cody Pezzulio			Contact Title Member			
Street Address 10 Jun	riper LA	NE	City Johnston	State RI	^{Z₁p} 02919	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<u>.</u>	<u>.</u>		Check the box to in-	dicate an attachment	
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 Date						
Cody Pezzullo 5/21/18						
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

MAY 35 2018

FORM 632 - Revised: 02/2017