RI SOS Filing Number: 201877075940 Date: 9/10/2018 12:46:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

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.

2018 SEP 10	RECEIVI SECRETARY C CORPORATIO
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Entity ID Number	2. Exact name of the Limited Liability Company					
001667179	J&D HOMESTEAD RENOVATIONS, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
120116	GENERAL CONTRACTING - HOME REPAIRS & UPGRADES					
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address			City	State	Zıp	
145 SPRING GROVE ROAD			CHEPACHET	RI	02814	
7. Mailing Address of Limited Lia	ibility Compa	ny and Name or T				
Contact Name DAVID MONIZ			Contact Title PARTNER			
Street Address 145 SPRING GROVE ROAD			City CHEPACHET	State RI	<sup>Zip</sup> 02814	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			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	Zip	City	State	Zip	
		<u> </u>	<u> </u>	Check the box to i	ndicate 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 dec statements, and that all staten	lare and affi nents contai	rm that I have ex ned herein are tr	camined this report, including rue and correct.	any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
DAVID MONIZ				09/05/2	09/05/2018	
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 **FILED** 

FORM 632 - Revised: 10/2017