State of Rhode Isla	and and Providen	ce Plantations				
/621			vices Division			
Annual Report for the year: 2013 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.					CCRETARIO S CCRPORATION S 2019 JUN - 7 MM 10	
1. Entity ID Number 142564	I	2. Exact name of the Limited Liability Company MJS Capital Equipment Company, LLC				
3 NAICS Code	4 Brief des	4 Brief description of the character of business conducted in Rhode Island				
533111 5. State of Formation	TO ENGA	TO ENGAGE IN LEASING, OWNING AND REPAIRING AUTOMOTIVE LEASING EQUIPMENT				
RHODE ISLAND						
6. Principal Office Address			City	State	Zıp	
380 VALLEY STREET			PROVIDENCE	RI	02908	
7. Mailing Address of Limite	<u> </u>	iny and Name o	r Title of Contact Person			
Contact Name MICHAEL SA	LVATORE		Contact Title			
Street Address 713 ACADEMY AVENUE			City PROVIDENCE	State RI	^{Zip} 02908	
8 List ALL managers (nami	es and addresses	s) of the Limited	Liability Company, IF APPLICAB	LE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zıp	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	
				Check the box to	ndicate an attachment	
9. Resident Agent in Rhode	Island, This inform	nation is currently	of record with the Department of Stat	e. Changes require filir	ig Form 642	
Under penalty of perjury, I	i declare and aff	irm that I have	examined this report, including	any accompanyin	g schedules and	

MAIL TO:

Signatura

Division of Business Services

Name of Authorized Person

MICHAEL J. SALVATORE

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

statements, and that all statements contained herein are true and correct.

Phone: (401) 222-3040 Website: www.sos.n.gov **FILED**

A.A. 10:40 A.M.

Date

06/07/2019

FQRM 632 - Revised: 10/2017