RI SOS Filing Number: 201922172800 Date: 9/30/2019 4:00:00 PM

6	te of Rhode Islan			
	De ment of	d and Providence Planta State - Business	Services	Division

STAMP

Annual Report for the year: 2019

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.

Entity ID Number	2. Exact name of the Limited Liability Company							
505896	Y & J BEAUTY SUPPLIES, LLC							
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island BEAUTY SUPPLIES							
5. State of Formation								
RHODE ISLAND								
6. Principal Office Address			City	State	Zip			
1366 BROAD STREET			PROVIDENCE	RI	02905			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person								
Conlact Name JUAN MATEO			Contact Title MANAGER					
Street Address 29 WILDWOOD AVENUE			City PROVIDENCE	State RI	^{Zip} 02905			
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS								
Manager Name JUAN MATEO			Manager Name					
Street Address 29 WILDWOOD AVENUE			Street Address					
City PROVIDENCE	State RI	Zip 02905	City	State	Zıp			
Manager Name			Manager Name					
Street Address		•	Street Address					
City	State	Zip	City	State	Zip			
	Check the box to indicate 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				ny accompanying	schedules and			
Name of Authorized Person	Date	Date						
JUAN MATEO					09/23/2019			
Signature of Authorized Rerson SIGN DOCUMENT HERE								
	/		· Š	FILE) //			

MAIL TO:

Division of Business Services

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

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

FORM 632 - Revised: 08/2016