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.

	0.5	# Al 1 2 - 24 - 1 2 2 2	1.174 A		
Entity ID Number	2. Exact name of the Limited Liability Company				
1102314	JUTONUS, LLC				
3. NAICS Code	Bnef description of the character of business conducted in Rhode Island				
531390	Real estate investment.				
5. State of Formation					
Rhode Island					
6. Principal Office Address			City	State	Zıp
780 Reservoir Avenue, Suite 290			Cranston	RI	02910
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Douglas H. Smith			Contact Title Authorized Agent		
Street Address 140 Reservoir Avenue			City Providence	State RI	^{Zip} 02907
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	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
			<u> </u>	Check the box to in	idicate 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	
Douglas H. Smith				เผ	8 B
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

OCT 1 8 2019

FORM 632- Revised: 4072017