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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.

1. Entity ID Number	2. Exact name of the Limited Liability Company					
698588	J and S Distribution Service, LLC					
3. NAICS Code 44-45 44-45	Brief description of the character of business conducted in Rhode Island Distribution of newspapers and periodicals and any other related business as permitted by law.					
5. State of Formation	1					
Rhode Island						
6. Principal Office Address			City	State	Zip	
25 Gianna Drive			Cranston	RI	02921	
7. Mailing Address of Limited Lia		ny and Name o	r Title of Contact Person	I	I	
Contact Name John R. Beauvais			Contact Title	Contact Title		
Street Address 25 Gianna Drive			City Cranston	State RI	^{Zip} 02921	
8. List ALL managers (names ar	nd addresses) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
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	Zıp	
	'			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	lare and affi nents contail	rm that I have ned herein are	examined this report, including true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person Date						
John R. Beauvais /0-/					0-10-19	
Signature of Authorized Person SIGN ENCOMENT HERE						
		-		. <u></u>		

MAIL TO:

Division of Business Services

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

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