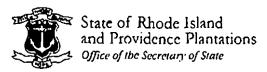
RI SOS Filing Number: 202040985600 Date: 5/27/2020 2:50:00 PM



A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence: RI 02904-2615
401-222,3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2017

Filing Period: September 1 - November 1 - Filing Fee: \$50.00° • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law
(R.I.G.L. 7-16-66 (b&r)) is subject to a penalty fee of \$25.00.

(ACA.O.C. 7-70-00 (BOT))		7··=1:5511 05 0						
7. ID No. 001337040	1	name of the limited liability company:  DJ'S, ELC						
3. State of Formation RI	allon  4. Brief description of the character of the bia ENTERTAINMENT/PROMOTIC			iness which is actually conducted in Kbode Island (541890)				
5 Irincipal office acidness 36 DERBYSHIRE DRIVE				CRANSTON	RI	Хφ 02921		
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND N Contact Nation JEREMY BRAZA				NAME OR TITLE OF CONTACT PERSON:  Contact Title  PRESIDENT				
Street Address 36 DERBYSHIRE DRIVE				Chi: CRANSTON	State RI	<i>Ζιρ</i> 02921		
7. NAME AND ADDI	RESS OF F			LIABILITY COMPANY, IF AP GATTACHMENTS ('X' BOX F		T LIST MEMBERS		
Stanager Name JEREMY BRAZA				Manager Name				
Since Address 36 DERBYSHIRE DRIVE				Street Address				
City: CRANSTON	a d	itate RI	2.ip 02921	Cup	State	Zф		
Manager Name				Manager Name				
Sing Addres				Street Address				
Chy	2.	itute	Zip	Chy	State	Ziji		
8. RESIDENT AGENT This information is cu			Office of the Secretary of	State. Changes require filing of	1 Form 642 - R.I.G.L. 7-1	16-11		
				FILED	2:50	_		
				MAY 2 7 2020	;	R.I. DEP BUS 2020 MAY		
				RYKL FNT	YN	RECE DEPT. US SV		

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

R.I. DEPT OF STATE BUS SVCS DIV

001337040

File Dute
Check No
By
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this repo	'nί
including any accompanying schedules and statements, and that all statement	nt.
contained herein see true and correct.	

Signature of Authorized Person

JEREMY BRAZA

Print or Type Name of Authorized Person