RI SOS Filing Number: 202052106910 Date: 9/4/2020 4:00:00 PM

State of Rhode Island and Providence Plantations  Department of State - Business Services Division						
2020 Annual Report for the year:	FILED STAMP					
Limited Liability Company	FOR SECRETARY DE STATE  CED A 4 2020 USE ONLY					
<ul> <li>→ Filing period: September 1 - November 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25.00 fee if form is not filed by December 1.</li> </ul>	SEP 04 2020 DS ONLY					

1. Entity ID Number	2. Exact name of the Limited Liability Company						
150642	JILLIAN REALTY, LLC						
3 NAICS Code	Brief description of the character of business conducted in Rhode Island     to own, develop and manage real estate						
531120							
5. State of Formation			<b></b>				
Massachusetts							
6. Principal Office Address	City			State	Zıp		
11 West Narragansett Road				Newport	RI	02840-0000	
7. Mailing Address of Limited Lia	ability Company	y and Name or Tit	tle of Con	tact Person		- <b>^</b>	
Contact Name Victor DaSilva				Contact Title Manager			
Street Address 11 West Narragansett R	toad		City	Newport	State RI	Zip 02840-0000	
8 List ALL managers (names a	ind addresses)	of the Limited Lia	ibility Con	npany, IF APPLICAB	LE - DO NOT LIST ME	MBERS	
Manager Name Victor DaSilva		Manag	Manager Name Michelle M. DaSilva				
Street Address 57 Jillian Way			Street	Street Address 57 Jillian Way			
City	State	Zip	City	•	State	Zıp	
Westport	MA_	02790	<del></del>	Westport	MA_	02790	
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City		State	Zıp	
					Check the box to inc	licate an attachment	
9. Resident Agent in Rhode Isla	ind. This informat	tion is currently of re	ecord with	the Department of Stat	e. Changes require filing	Form 642.	
Under penalty of perjury, I dec statements, and that all states	clare and affirm ments contain	n that I have exa ed herein are tru	mined th	nis report, including prrect.	any accompanying	schedules and	
Name of Authorized Person	zed Person			Date	Date		
Victor DaSilva	Manager			09/03	09/07/2020		
Signature of Authorized Person		SIGNE		NTUEDE			
7		SIGN D	JOCOME	NT 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