

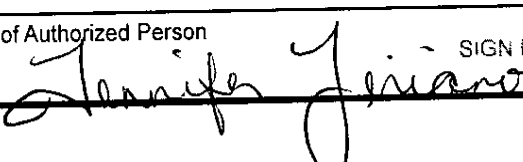


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: **2020**
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.

FILED
STAMP
OCT 19 2020
BY 253 DS

1. Entity ID Number 001679137		2. Exact name of the Limited Liability Company J & J TAXI, LLC			
3. NAICS Code 485310		4. Brief description of the character of business conducted in Rhode Island TAXI SERVICES			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 485 CRANSTON ST		City PROVIDENCE		State RI	Zip 02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JENNIFER LIRIANO			Contact Title PRESIDENT		
Street Address 279 LAUREL HILL AVE. APT. 1			City PROVIDENCE		State RI Zip 02909
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name EVELIN GONZALEZ			Manager Name YOMARY SANTOS VARGAS		
Street Address 226 MESSER ST			Street Address 61 WALLACE ST. 2ND FL		
City PROVIDENCE	State RI	Zip 02907	City PROVIDENCE	State RI	Zip 02909
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 JENNIFER LIRIANO				Date 09/30/2020	
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