



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<sup>-</sup> Additional \$25.00 fee if form is not filed by December 1.

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	FILEDIANT
	OCT 2 6 2020
BY	1132
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1. Entity ID Number 2. Exact name of the Limited Liability Company JUMPIN JUPITER, LLC								
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island							
713120	ARCADES/AMUSEMENTS							
5 State of Formation RI								
Principal Office Address			City	State	Zιρ			
58 PRESTON DRIVE			CRANSTON	RI	02910			
7. Mailing Address of Limited Lia	bility Company	and Name or Title	of Contact Person	. I-				
Contact Name AARON SUTCLIF	FE		Contact Title VICE PRESIDENT					
Street Address 22 MORGAN MIL	L ROAD		City JOHNSTON	State RI	<sup>Zıp</sup> 02919			
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	Zıp	City	Stale	Zıp			
Manager Name		1	Manager Name					
Street Address			Street Address					
City	State	Zip	City	State	Zip			
Check the box to indicate an attachment								
9 Resident Agent in Rhode Islan	nd. This informati	on is currently of rec	ord with the Department of Sta	te. Changes require film	g 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	•					
AARON SUTCLIFFE			toli	1/20				
Signature of Authorized Person Signature of Authorized Person Signature of Authorized Person Signature of Authorized Person								

MAIL TO:

**Division of Business Services** 

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

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