RI SOS Filing Number: 202190808200 Date: 2/11/2021 4:00:00 PM

State of Rhode Island						
Department of State - Business Services Division						
<i>~</i> ",						
Annual Report for the	vear:	2020				
Limited Liability Comp					20	
→ Filing period: September 1 - November 1					R.I. E 2021 F	
 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by December 1. 						
7 Ferfally. Additional \$25.0	o lee il lorm i	s not filed by Dece	mber 1.		T SV STORY	
1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
1671278	136	2. Exact name of the Limited Liability Company JCHV GROUP LLC				
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island				
.531110	1 to the second of the second					
5. State of Formation	INVERSMENT					
RI	`					
6. Principal Office Address	1		City	State	Zip	
95 ALEXAN	der	St.	N. Providence	hT.	02904	
7. Mailing Address of Limited Li		ny and Name or Titl	e of Contact Person	1 1 2	10210	
Contact Name JUIO HERNANDER Contact Title QUINE						
Street Address /			City	State	Zio_	
95 AlexAn		St.	1 N. Roordener	NI	Zip 022904	
Manager Name	and addresses	s) of the Limited Liab	Dility Company, IF APPLICABLE	DO NOT LIST M	EMBERS	
			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name	<u>. </u>	_	Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<u>.L</u> _			hack the box to in	dicate an attachment	
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
Under penalty of perjury, I de	clare and affi	irm that I have exa	mined this report, including an			
statements, and that all state. Name of Authorized Person	ments contai	ned herein are true	e and correct.	Date 1		
Julio Hernandez 1779/2020						
Signature of Authorized Person						
	. / >		 		 .	
	FILED					
MAIL TO:						
Division of Rusiness Services			FFD 4	I I 2024		

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

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

FORM 632 - Revised: 08/2020