RI SOS Filing Number: 202193559190 Date: 3/3/2021 3:21:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:	2015
Limited Liability Company	

RECEIVED.

R.I. DEPT. OF STATE-IVEP
BUS SVCS DIV

→ Filing period: September 1 - November 1

2021 FEB 18 AM 9: 16

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000507435	ł.	Exact name of the Limited Liability Company NJMA, LLC					
3. NAICS Code 722511		Brief description of the character of business conducted in Rhode Island EAT IN OR TAKE OUR RESTAURANT					
5. State of Formation RI							
6. Principal Office Address 1633 WARWICK AVE			City WARWICK	State RI	Zip 02889		
7. Mailing Address of Limited	d Liability Compa	any and Name o					
Contact Name NICHOLAS J DEGAITAS		Contact Title MEMBER					
Street Address 1633 WARWICK AVE		City WARWICK	State RI	Z:p 02889			
8. List ALL managers (name	es and addresse	s) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST	MERBERS (2)		
Manager Name		Manager Name					
Street Address		Street Address		3 X X X X X X X X X X X X X X X X X X X			
City	State	Zip	City	State	3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
Manager Name			Manager Name				
Street Address		Street Address					
City	State	Zip	City	State	Zip		
	ı	1	_ ,	Check the box to	indicate an attachment		
9. The Resident Agent inform	mation currently	of record with th	e RI Department of State is accu	ırate. Changes requi	re filing Form 642.		
Under penalty of perjury, I statements, and that all st			examined this report, including true and correct.	g any accompanyi	ng schedules and		
Name of Authorized Person NICHOLAS J DEGAITAS			Date 2/12/21				
Signature of Authorized Per	son						

MAIL TO:

Division of Business Services

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

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

MAR 03 2021

OW FORM 6

FORM 632 - Revised: 08/2020