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State of Rhode Island

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.

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	R.I. DEPT. OF STATE O	R.I. DEPT. OF STATE' MEI SEP 24 MII: 17

1. Entity ID Number 000487468	2. Exact name of the Limited Liability Company						
	JMQ Woonsocket, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531390	Acquire, develop, hold, improve, maintain, operate, sell, lease or otherwise deal with real						
5. State of Formation	property, and otherwise engage in any lawful business.						
RI							
6. Principal Office Address	Principal Office Address			State	Zip		
6 Christopher Drive			Lincoln	RI	02865		
7. Mailing Address of Limited Lia	bility Compan	y and Name or Title					
Contact Name Carole Quarles			Contact Title President				
Street Address 6 Christopher Drive			City Lincoln	State RI	^{Zip} 02865		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Manager			Manager Name	lanager Name			
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate 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 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	Date		
Carole Quartes				91231	ବାଞ୍ଚାର।		
Signature of Authorized Person							
Carole Quarles							

MAIL TO:

Division of Business Services

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

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

FORM 632 - Revised: 08/2020