RI SOS Filing Number: 202102189610 Date: 9/24/2021 11:26:00 AM



Department of State - Business Services Division

Annual Report for the year: 2017 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.

/	R.I. DESCENCE
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	2021 SEP 24 AMIL: 17

1. Entity ID Number	2. Exact name of the Limited Liability Company						
000487468	JMQ W	JMQ Woonsocket, LLC					
3. NAICS Code 531390	4. Brief description of the character of business conducted in Rhode Island Acquire, develop, hold, improve, maintain, operate, sell, lease or otherwise deal with real						
5. State of Formation RI	property,	property, and otherwise engage in any lawful business.					
Principal Office Address Christopher Drive	•	-	City Lincoln	State RI	Zip 02865		
7. Mailing Address of Limited L	iability Compa	any and Name o					
Contact Name Carole Quarles	;		Contact Title President				
Street Address 6 Christopher	Drive		City Lincoln	State RI	^{Zip} 02865		
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			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		
	. 1	<u></u>		Check the box to	indicate an attachment		
9. The Resident Agent informa	ation currently	of record with th	e RI Department of State is ac	curate. Changes requir	e filing Form 642.		
Under penalty of perjury, I d statements, and that all stat			examined this report, include true and correct.	ling any accompanyin	g schedules and		
Name of Authorized Person	Date	Date					
Carole Ouar	125		9133131				
Signature of Authorized Perso	on _						
L'Arale Que	40cs			· · · · · · · · · · · · · · · · · · ·			

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

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FORM 632 - Revised: 08/2020