RI SOS Filing Number: 202105344430 Date: 11/23/2021 4:00:00 PM



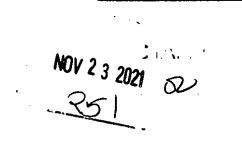
State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021 **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.



1. Entity ID Number	2. Exact name of the Limited Liability Company					
000136539	JAMA, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
531390	TO OWN AND OPERATE REAL ESTATE					
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zip		
120 DUDLEY STREET, 3RD FLOOR			PROVIDENCE	RI	02905	
7. Mailing Address of Limited Lia		and Name or Title	of Contact Person			
Contact Name ANDREW W. DAVIS			Contact Title RESIDENT AGENT			
Street Address 101 DYER STREET, SECOND FLOOR			City PROVIDENCE	State RI	^{Zip} 02903	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Manager Name N/A			Manager Name N/A			
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 dec statements, and that all staten	clare and affirm ments contained	that I have exan d herein are true	nined this report, including a and correct.	any accompanying s	schedules and	
Name of Authorized Person				Date	Date	
PHILIP R. RIZZU/O/MD				11/10/21	11/10/21	
Signature of Authorized Person	MA			•		

MAIL TO:

Division of Business Services

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

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