	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St	reet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2021			
1. ID No. <u>000101082</u>			
2. Exact Name of the Limited Liability Company JONES MOVING & STORAGE COMPANY, <u>LLC</u>			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>484210</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
COMMERCIAL AND RESIDENTIAL MOVING BUSINESS AND STORAGE OF PROPERTY			
5. Principal Office Addre	SS		
No. and Street: <u>59 CENTRAL STREET</u>			
City or Town: <u>PROVIDENCE</u> State: <u>RI</u> Zip: <u>02907</u> Country: <u>USA</u>			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>KEVIN KERNAN</u> Contact Title: No. and Street: <u>59 CENTRAL STREET</u>			
	VIDENCE State:	<u>RI</u> Zip: <u>02907</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addre	SS
	First, Middle, Last, Suffix	Address, City or Town, Sta	ite, Zip Code, Country
MANAGER	KEVIN P. KERNAN 219 OAK TREE AVENUE WARWICK, RI 02888 USA		

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

MARK A. CHARLESON 2181A POST ROAD WARWICK , RI 02886

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 30 Day of November, 2021 at 4:43:32 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MARK A CHARLESON

Signature of Authorized Person

Form No. 632 Revised 09/07

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