

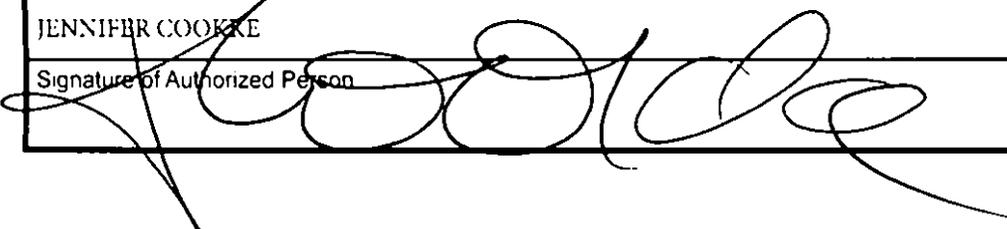


State of Rhode Island
Department of State - Business Services Division

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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 1672852		2. Exact name of the Limited Liability Company SCOJEN LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island OWNER OF REAL ESTATE			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 6 BLACKSTONE VALLEY PLACE, SUITE 401			City LINCOLN	State RI	Zip 02865
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JOSEPH RAHEB			Contact Title ATTORNEY		
Street Address 650 WASHINGTON HWY., SUITE 200			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 JENNIFER COOKE			Manager Name		
Street Address 6 BLACKSTONE VALLEY PLACE, SUITE 401			Street Address		
City LINCOLN	State RI	Zip 02865	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 JENNIFER COOKE				Date 11-12-2021	
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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 FORM 632 - Revised: 08/2020