



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020

Limited Liability Company

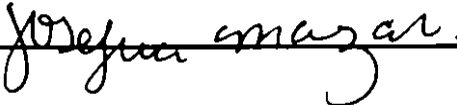
→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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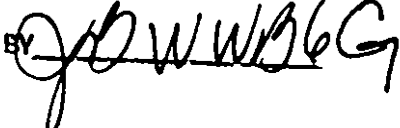
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|   |  |   |                    |
|---|--|---|--------------------|
| 1. Entity ID Number<br><b>001696482</b>   |  | 2. Exact name of the Limited Liability Company<br><b>J &amp; M SOLUTIONS LLC</b>  |                    |
| 3. NAICS Code<br><b>561720</b>  |  | 4. Brief description of the character of business conducted in Rhode Island<br><b>Janitorial Services, Residential and Commercial</b> |                    |
| 5. State of Formation<br><b>RHODE ISLAND</b>  |  |   |                    |
| 6. Principal Office Address<br><b>9 Hooper Place</b>  |  | City<br><b>Providence</b>   | State<br><b>RI</b> |
|   |  | Zip<br><b>02908</b>   |                    |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |   |                    |
| Contact Name<br><b>JOSEFINA MARIZAN</b>   |  | Contact Title<br><b>OWNER</b>   |                    |
| Street Address<br><b>9 HOOPER PLACE</b>   |  | City<br><b>PROVIDENCE</b>   | State<br><b>RI</b> |
|   |  | Zip<br><b>02908</b>   |                    |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.   |  |   |                    |
| <i>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.</i> |  |   |                    |
| Name of Authorized Person<br><b>JOSEFINA MARIZAN</b>  |  | Date<br><b>5/17/2022</b>  |                    |
| Signature of Authorized Person<br>   |  |   |                    |

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BY 

MAIL TO:

Division of Business Services

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