	State of Rhode Island Fee: \$50.0
	Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
1630	(401) 222-3040
Limited Liability	/ Company
Annual Report Filing Period: Feb	ruary 1 - May 1
In accordance with	h R.I.G.L. 7-16-66(d), each limited liability company failing or
	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 REPOR	T YEAR: <u>2023</u>
1. ID No. <u>001</u>	<u>695180</u>
2. Exact Name of the Limited Liability Company <u>JDI Holdings LLC</u>	
3. State of Form	ation
State: <u>RI</u>	
	ARTICLE III
-	
-	NAICS Code that best describes the primary business conducted by the entity. of codes here. More information on NAICS can be found online.
<u>531130</u>	
4. Brief Descripti Island	on of the Character of the Business Which is Actually Conducted in Rhode
JDI HOLDINGS	LLC PROVIDES PRIVATE STORAGE
5. Principal Offic	e Address
No. and Street:	11 AMFLEX DRIVE UNIT 3
City or Town:	CRANSTONState: RIZip: 02921Country: USA
6. Mailing Addres	ss of Limited Liability Company and Name or Title of Contact Person:
Contact Name:	Contact Title:
No. and Street:	<u>11 AMFLEX DRIVE</u>
	UNIT 3
City or Town:	CRANSTON State: <u>RI</u> Zip: <u>02921</u> Country: <u>US</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER	
Changes Requ	ire Filing of Form 642 - R.I.G.L. 7-16-11

DEREK IORFIDA 11 AMFLEX DRIVE UNIT 3 CRANSTON , RI 02921

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

Signed this 24 Day of January, 2023 at 11:32:54 AM 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 JENNA IORFIDA

Signature of Authorized Person

Form No. 632 Revised 09/07

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