RI SOS Filing Number: 202336583710 Date: 6/5/2023 4:00:00 PM



State of Rhode Island

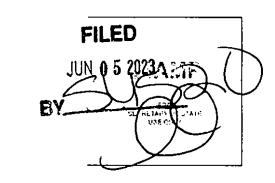
Department of State - Business Services Division

Annual Report for the year: 2023
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.



1. Entity ID Number 1063627	2. Exact name of the Limited Liability Company JOLIDA LLC			
3. NAICS Code 531120	4. Brief description of the character of business conducted in Rhode Island Hold and manage real estate			
5. State of Formation RI				
6. Principal Office Address P.O. Box 719		City Barrington	State RI	Zip 02806
7. Mailing Address of Limite	ed Liability Company and Name or	Title of Contact Person	······································	•
Contact Name Daniel Lemos		Contact Title Member		
Street Address P.O. Box 719		City Barrington	State RI	^{Zıp} 02806
9. The Resident Agent info	rmation currently of record with the	RI Department of State is accur	rate. Changes require	e filing Form 642.
	I declare and affirm that I have extatements contained herein are t		any accompanyin	g schedules and
Name of Authorized Person Daniel Lemos		Date //23		
Signature of Authorized Pe	un dema		• / [

MAIL TO:

Division of Business Services

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

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