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State of Rhode Island **Department of State - Business Services Division**

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Annual Report for the year: 2024 **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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2024 JAN 25 P 12: 42

1. Entity ID Number	2. Exact name of the Limited	2. Exact name of the Limited Liability Company			
001048276	JAYLAND TRANS	JAYLAND TRANSPORTATION LLC			
3. NAICS Code 485310	*	Brief description of the character of business conducted in Rhode Island TRANSPORTATION AND LIVERY SERVICES			
5. State of Formation					
6. Principal Office Address		City	State	Zip	
528 SMITHFIELD RD, APT.205		NORTH PROVIDENCE	RI	02904	
7. Mailing Address of Limited	d Liability Company and Name or T	Fitle of Contact Person			
Contact Name OLANIYI AEDKUNLE MATANMI		Contact Title OWNER			
Street Address 528 SMITHFIELD RD, APT.205		City N PROVIDENCE	State RI	^{Zip} 02904	
8. The Resident Agent inform	nation currently of record with the f	RI Department of State is accurate. C	hanges requir	e filing Form 642.	
	r, I declare and affirm that I have atements contained herein are tr	examined this report, including an	у ассотрапу	ring schedules and	
Name of Authorized Person			Date		
OLANIYI AEDKUNLE MATANMI			01/24/2024		
Signature of Authorized Pers	son Ammm	·			

MAIL TO:

Division of Business Services

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

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