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

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Annual Report for the year: **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.

2024

| 1. Entity ID Number 877705 | 2. Exact name of the Limited Liability Company JNB, LLC | | | |
|---|--|---------------|----------|----------------------|
| 3. NAICS Code 531311 | Brief description of the character of business conducted in Rhode Island REAL ESTATE | | | |
| 5. State of Formation RHODE ISLAND | | | | |
| 6. Principal Office Address | | City | State | Zip |
| C/O ROBINSON & COLE LLP, ONE FINANCIAL PLAZA, 14th FLOOR | | PROVIDENCE | RI | 02903 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | |
| Contact Name ROGER A. PETERS, II, ESQ. | | Contact Title | | |
| ONE FINANCIAL PLAZA, 14TH FLOOR | | PROVIDENCE | State RI | ^{Zip} 02903 |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642 | | | | |
| 9. 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 | | | Date | |
| THOMAS M. RYAN | | | 2/25/24 | |
| Signature of Authorized Person | | | | |

MAIL TO:

Division of Business Services

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

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