




State of Rhode Island
Department of State - Business Services Division

REC'D: RIDOS BSD
24 MAR 14 AM 9:26:42

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.

| | | | |
|---|--|---|--------------------|
| 1. Entity ID Number 001728420 | | 2. Exact name of the Limited Liability Company JB Mella LLC | |
| 3. NAICS Code 484110 | | 4. Brief description of the character of business conducted in Rhode Island Trucking | |
| 5. State of Formation Rhode Island | | | |
| 6. Principal Office Address 36 Cross st | | City central falls | State RI |
| Zip 02863 | | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Jose mella | | Contact Title owner | |
| Street Address 36 cross st | | City central falls | State RI |
| Zip 02863 | | | |
| 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 Jose mella | | | Date 03/14/2024 |
| Signature of Authorized Person  | | | |

FILED

MAR 14 2024

BY NSX9N
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MAIL TO:
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