RI SOS Filing Number: 202448718620 Date: 3/15/2024 2:36:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **Limited Liability Company**

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000720160		2. Exact name of the Limited Liability Company Nineteen Moses Brown LLC				
3 NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island				
531190	To hold, i	To hold, invest, rent, purchase and sell real estate				
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
1162 Atwood Avenue			Johnston	RI	02919	
7. Mailing Address of Limite	ed Liability Compa	any and Name o	r Title of Contact Person	<u>+</u>		
Contact Name Amir H. Jourbachi			Contact Title Sole Member			
Street Address 1162 Atwood Avenue			City Johnston	State RI	Zip 02919	
8. List ALL managers (nam	es and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
<u> </u>	<u> </u>			Check the box to	indicate an attachment	
9. Resident Agent in Rhode	Island. This inform	nation is currently	of record with the Department of St	ate. Changes require fili	ng Form 642.	
Under penalty of perjury, statements, and that all st			examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person				Date 3/	15/14	
Signature of Authorized Per	son	~ < SiG	N GOOUNENT HERE		, ,	

MAIL TO:

Division of Business Services

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

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

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