

STAPR. D. L. 2021 BY

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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1. Entity ID Number	2. Exact name of the Limited Liability Company			
698588	J and S Distribution Service, LLC			
3. NAICE CODES	4. Brief description of the character of business conducted in Rhode Island			
ログイン	Distribution of newspapers and periodicals and any other business as permitted by law.			
5. State of Formation				
Rhode Island				
Trilode Island	<u> </u>			
6. Principal Office Address		City	State	Zip
25 Gianna Drive		Cranston	RI	02921
7. Mailing Address of Limited Lia	ability Company and Name or Titl	le of Contact Person		
Contact Name John R. Beauvais		Contact Title		
Street Address 25 Gianna Drive		City Cranston	State RI	^{Zip} 02921
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
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	
John R. Beauvais			3	-22-2024
Signature of Authorized Person				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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