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## State of Rhode Island

## **Department of State - Business Services Division**

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.

Entity ID Number	2. Exact name of the Limit	2. Exact name of the Limited Liability Company				
1658117		DJS2 Properties, LLC				
3. NAICS Code	4. Brief description of the c	4. Brief description of the character of business conducted in Rhode Island				
531390	Purchase, hold, dev	Purchase, hold, develop, improve and rent real estate.				
5. State of Formation	$\neg$					
RI				ı		
6. Principal Office Address		City	State	Zıp		
799 East Third Street	t, Unit 3	Boston	MA	02127		
7. Mailing Address of Limited	d Liability Company and Name or	r Title of Contact Person				
Contact Name David P. Acciardo		Contact Title Manager				
Street Address 799 East Third Street, Unit 3		City Boston	State MA	<sup>2ip</sup> 02127		
8. The Resident Agent inform	mation currently of record with the	RI Department of State is acr	curate. Changes require	a filing Form 642.		
	y, I declare and affirm that I hav atements contained herein are		uding any accompanyi	ing schedules and		
Name of Authorized Person			Date			
David P. Acciarde, M.	anager A		4/3/2	4		
Signature of Authorized Pers	ion D		<del></del>			

FILED

MAY 0 1 2024

MAIL TO:

**Division of Business Services** 

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

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