RI SOS Filing Number: 202453822310 Date: 4/30/2024 4:00:00 PM

-

State of Rhode Island Department of State - Business Services Division

2024 Annual Report for the year:

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

Limited Liability Company

-> Penalty: Additional \$25.00 fee if form is not filed by May 31.

REC'	
) RIDCS 850 30 PM 2:32:58	

1. Entity ID Number	2. Exact name of the Limited	2. Exact name of the Limited Liability Company			
1					
000093060	Joner Suobhersrow	Jobel Shopperstown Associates, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island To acquire, develop, finance, manage and sell real estate.				
531120,					
5. State of Formation	10 audulia, devolop, ii	manue, manayo anu s	XIII I GAI GOLALE.		
MA .					
6. Principal Office Address	<u></u>	City	State	Zip	
76 Walnut Street		Dedham	MA	02026	
7. Mailing Address of Limited	d Liability Company and Name or Ti	tle of Contact Person			
Contact Name Harris Krafchick		Contact Title Manager			
Street Address 76 Walnut Street		City Dedham	State MA	^{Zip} 02026	
8. The Resident Agent inform	nation currently of record with the R	I Department of State Is accu	urate. Changes require	filing Form 842.	
9. Under penalty of perjury statements, and that all st	y, I declare and affirm that I have e atements contained herein are tru	examined this report, include and correct.	ding any accompany!	ng schedules and	
Name of Authorized Person			Date		
Harris Krafchick			4/2	1124	
Signature of Authorized Per	°C/AL				

M3 FILED	1232
APR 3 0 202	24
BY 1183	

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.ri.gov