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Annual Report for the year: 2025 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 Limited Liability Company				
001773057	JY, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531120	Ownership and operation	Ownership and operation of real estate.			
5. State of Formation					
Rhode Island				i	
6. Principal Office Address		City	State	Zip	
85 Nelson Street		Cranston	RI	02921	
7. Mailing Address of Limited	Liability Company and Name or Title				
Contact Name Jonathan Yaghjian		Contact Title Sole Member			
Street Address 85 Nelson Street		City Cranston	State RI	^{Zip} 02921	
8. The Resident Agent informa	ation currently of record with the RI I	Department of State is accu	rate. Changes require	filing Form 642	
	leclare and affirm that I have exan tements contained herein are true		g any accompanying	schedules and	
Name of Authorized Person			Date		
Jonathan Yaghjian, Sole Member				27125	
Signature of Authorized Person)n (

MAIL TO:

Division of Business Services148 W. River Street, Providence, Rhode Island 02904-2615

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



FORM 632 - Revised: 11/2021