



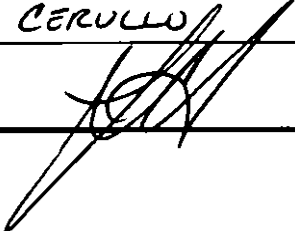
State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

2024

- 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 001736528		2. Exact name of the Limited Liability Company JCSKYVIEW LLC		
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE OWNERSHIP		
5. State of Formation RI				
6. Principal Office Address 100 EXCHANGE ST		City PROVIDENCE	State RI	Zip 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name JAMES CERULLO		Contact Title OWNER		
Street Address 655 WASHINGTON ST APT 455		City WEYMOUTH	State MA	Zip 02188
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. 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 JAMES CERULLO			Date 5/7/25	
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

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JUN 18 2025
BY FPETH
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