

State of Rhode Island						
86. 26 A	of State - Bus	iness Serv	ices Division		. 63	
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					200 Sept. 1	
nnual Report for t	he year:	2020			ට් ගිරීම්	
mited Liability Co					<u> </u>	
→ Filing period: Septer		er 1				
→ Filing Fee: \$50.00					<b>差</b> このに	
Penalty: Additional \$	i25.00 fee if form i	s not filed by Di	ecember 1.		9 23	
. Entity ID Number	2 Event no	ma of the Limite	d Lightlih, Company			
001694657		2. Exact name of the Limited Liability Company  JEMKCONROY, LLC				
<u></u>						
. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island				
531110	Re	Real Estate Property				
. State of Formation						
RI						
. Principal Office Address			City	State	Zip	
100 Old Washington Road			Ridgefield	СТ	06877	
. Mailing Address of Limit	ted Liability Compa	iny and Name o	Title of Contact Person			
Contact Name			Contact Title			
John V. McCloskey			Esquire City	State	Zip	
Street Address 110 Main Street			Wakefield	RI	02879	
. List ALL managers (nai	mes and addresse	s) of the Limited	Liability Company, IF APPLICAS	BLE - DO NOT LIST	MEMBERS	
Manager Name		_	Manager Name			
Street Address			Street Address			
2.	Curt	7.4	City	State	Zip	
City	State	Ζιρ	City	State		
Manager Name			Manager Name			
			Street Address			
Street Address			Gueet Address			
City	Støte	Zlp	City	State	Zip	
		<u>l</u>		Check the box to	indicate an attachment [	
			- Di Danadment of Chain in appu			
			e Rt Department of State is accu			
Under penalty of pequry statements, and that all	y, i deciare and an statements conta	rirm that i have iined herein are	examined this report, including true and correct.	g any accompany		
Name of Authorized Person				Date		
James E. Co	nroy			///	2/21	
Signature of Authorized P			<del></del>		1	
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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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