	State of I Office of the S	Rhode Island Secretary of	-	Fee: \$50.00
		Business Servi	ces	
148 W. River Street Providence RI 02904-2615				
1636		RI 02904-261 222-3040	.5	
Limited Liability Annual Report Filing Period: Febru				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. ID No. <u>001730332</u>				
2. Exact Name of the Limited Liability Company <u>Jack's Folly, LLC</u>				
3. State of Forma	tion			
State: <u>RI</u>				
NAICS CODE				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>551112</u>				
4. Brief Description	on of the Character of the Busin	ess Which is <i>i</i>	Actually Condu	cted in Rhode
HOLDING AND MANAGING REAL AND PERSONAL PROPERTY				
5. Principal Office	e Address			
No. and Street:	125 ZARBO AVENUE			
City or Town:	<u>NORTH KINGSTOWN</u>	State: <u>RI</u>	Zip: <u>02852</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: C				
No. and Street: City or Town:	<u>125 ZARBO AVENUE</u> NORTH KINGSTOWN	State: <u>RI</u>	Zip: <u>02852</u>	Country: <u>US</u>
	INT IN RHODE ISLAND - DO NOT re Filing of Form 642 - R.I.G.L. 7			
<u>RICHARD J. LAND, ESQ. ONE PARK ROW SUITE 300 PROVIDENCE , RI 02903</u>				

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 1 Day of April, 2024 at 2:00:00 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>WALTER VALENCIA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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