	State of Rhode Island and P Office of the Secre		Fee: \$50.00
	Division Of Busine 148 W. River Providence RI 02	Street	
HOPE	(401) 222-3	3040	
Limited Liabilit Annual Report Filing Period: Septe			
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: 2018			
1. ID No. <u>001678481</u>			
2. Exact Name of the Limited Liability Company Collateral Management LLC			
3. State of Formation			
State: <u>WY</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
<u>531320</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
APPRAISAL MANAGEMENT			
5. Principal Office Address			
No. and Street:	<u>2400 E COMMERCIAL BLVD</u> 1050		
City or Town:	FORT LAUDERDALE	State: <u>FL</u> Zip: <u>33308</u> Countr	ry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: JESSICA MASSAD Contact Title: PRESSSSIDENT			
No. and Street: <u>2400 E COMMERCIAL BLVD</u> 1050			
City or Town:		State: <u>FL</u> Zip: <u>33308</u> Count	ry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Cod	e, Country
1			

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

INCORP SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

**Signed this 30 Day of August, 2018 at 10:05:41 AM 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 JESSICA MASSAD

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$  2007 - 2018 State of Rhode Island and Providence Plantations All Rights Reserved