

RECEIVED STATION OF STATIONS DIV

Annual Report for the year: \(\sum_0018 \)
Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2 Evertoers of the Limited Line of				
F	2. Exact name of the Limited Liability Company				
001675496	Platinum Properties LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
<u> 531110</u>	Real estate				
5. State of Formation	•				
RI					:
6. Principal Office Address			City	State	Zip
446 Main St			Warren	RI	02855
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
David Scauns			Contact Title mender		
Street Address Main St			citywaren	State A	2ip 0 2-887-
6. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zp	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
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 Date					
David Seguino				9/11/1	ر _ي .
Signature of Authorized Person					
2001 (DOCD # 41) (48.2%					

FILED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 1 1 2018

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