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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:	2019
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.

SECRETACENTED CORPORATIONS OF
2019 NOV 26 12 AN 11: 36

	·			· · · · · · · · · · · · · · · · · · ·		
1. Entity ID Number 528636	2. Exact name of the Limited Liability Company PPM & Co., LLC					
3 NAICS Code	Brief description of the character of business conducted in Rhode Island					
531390	Ownership and management of Real Estate					
5. State of Formation RI	<u></u>					
6. Principal Office Address			City	State	Zıp	
87A Kingstown Road			Wyoming	RI	02828	
7. Mailing Address of Limited Li	ability Compan	y and Name or Tit	e of Contact Person	•		
Contact Name Paul P. Mihailides		Contact Title Manager				
Street Address 87A Kingstown Road		City Wyoming	State RI	Z _{IP} 02828		
8. List ALL managers (names a	ind addresses)	of the Limited Lial	bility Company, IF APPLICA	BLE - DO NOT LIST N	MEMBERS	
Manager Name Paul P. Mihailides		Manager Name				
Street Address 87A Kingstown Road		Street Address				
^{City} Wyoming	State RI	^{Zıp} 02828	City	State	Zıp	
Manager Name			Manager Name			
Street Address		Street Address				
City	State	Zip	City	State	Zip	
			<u></u>	Check the box to it	ndicate an attachment	
9. Resident Agent in Rhode Isla	and. This informa	ation is currently of re	ecord with the Department of St	ate. Changes require filin	g Form 642.	
Under penalty of perjury, I de statements, and that all state				ng any accompanyin	g schedules and	
Name of Authorized Person Paul P. Mihailides, Manager			Date //- 25-19			
Signature of Authorized Person	yr	SIGN D	OCUMENT HERE	•		
V	đ -					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov FILED

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FORM 632 - Revised: 08/2017