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State of Rhode Island and Providence Plantations **Department of State - Business Services Division** R.I. DEPT. OF STATE BUS SVCS DIV

2020 FEB 26 A 9: 17

Annual Report for the year: **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.

Entity ID Number	2. Exact name of the Limited Liability Company				
1338896	custom Propreties LLC.				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531110					
5. State of Formation Prosect , mintenone Man Estate SERVICER					
5. State of Formation Property mantenene Manl Estate SERVICER Cristiction.					
6. Principal Office Address			Smith Fire	State	Zip
15/ 010 county rd.			Sm 114 LIED	aCE .	W517
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name TOSEPH RICCI			Contact Title		
Street Address 15/010 County Rd.			City Smith FITUP	State	Zip 02917
8. 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	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
· · · · · · · · · · · · · · · · · · ·	<u> </u>		Ch	eck the box to in	dicate 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					
JOSEPH Kicci 2-26-20					5-20
Signature of Authorized Person					
7					

MAIL TO:

Division of Business Services

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

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

FEB 26 2020