		State of Rhode Office of the Secre		Fee: \$50.0
		Division Of Busine 148 W. River		
HOPE		Providence RI 02 (401) 222-3		
Limited Liability		ber 1		
n accordance with	R.I.G.L. 7-16-66(ort within thirty (3	d), each limited liability cor 30) days after the time pres		
ANNUAL REPORT	YEAR: <u>2020</u>			
1. ID No. <u>001</u>	310959			
2. Exact Name of	f the Limited Lia	ability Company <u>PT CO</u>	MPUTING LLC	
3. State of Forma	ation			
State: <u>RI</u>				
		ARTICLE III		
-		best describes the primar tion on <u>NAICS</u> can be foun		by the entity. Download
	on of the Charac	cter of the Business Whi	h is Actually Conduc	ted in Rhode Island
•				
	TECHNOLOG	<u> SY SERVICES, TO ANI</u>	D INCLUDING COM	IPUTER REPAIR,
AND		EMOTE DESKTOP SUP	PORT AND NETWO	DRKING SETUP
MAINTENANC				
5. Principal Office	e Address			
No. and Street: City or Town:	625 MENDO CUMBERL		: <u>RI</u> Zip: <u>02864</u>	Country: <u>USA</u>
6. Mailing Addres	s of Limited Lia	ability Company and Nan	ne or Title of Contact	Person:
-	HILIP TRIFONO		<u>ENT</u>	
No. and Street: City or Town:	625 MENDO		: <u>RI</u> Zip: <u>02864</u>	Country: <u>USA</u>
7. Name and Add		anager of the Limited Lia		
DO NOT LIST N	MEMBERS			
Title		Individual Name	Ad	dress

First.	Middle,	Last.	Suffix
,		=	•••••

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

PHILIP TRIFONOV 625 MENDON ROAD CUMBERLAND, RI 02864

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

Signed this 29 Day of September, 2020 at 11:53:40 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 <u>PHILIP TRIFONOV</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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