

FILED

SEP 30'2020

Annual Report for the year: 2020 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 506318	t e	2. Exact name of the Limited Liability Company TMD Holdings, LLC.				
3. NAICS Code	4. Brief des	Brief description of the character of business conducted in Rhode Island				
53110	Purchasi	Purchasing, leasing, sale of real estate and any other lawful purpose				
5. State of Formation	7					
Rhode Island						
6. Principal Office Address			City	State	Zıp	
26 Silver Spring Street			Providence	RI	02904	
7. Mailing Address of Limited L		any and Name or				
Contact Name William F. Donahue, IV			Contact Title Member	Contact Title Member		
Street Address 26 Silver Spring Street			City Providence	State RI	^{Zip} 02904	
8. List ALL managers (names	and addresses	s) of the Limited	Liability Company, IF APPLICAB	LE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
				Check the box to	indicate an attachment	
9. Resident Agent in Rhode Isl	land. This infom	nation is currently	of record with the Department of Stat	te. Changes require filir	ng Form 642.	
Under penalty of perjury, I destatements, and that all state			examined this report, including true and correct.	any accompanyin	g schedules and	
Name of Authorized Person				Date		
William F. Donahue, IV				9/14/20		
Signature of Authorized Perso	-			-		
		SIGN	N DOCUMENT HERE			

MAIL TO:

Division of Business Services

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

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