



State of Rhode Island

Department of State - Business Services Division

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.

FILED

STAMP

OCT 08 2020

BY 243

1. Entity ID Number 000107103		2. Exact name of the Limited Liability Company M/D Trust, LLC			
3. NAICS Code 55112		4. Brief description of the character of business conducted in Rhode Island Hold securities			
5. State of Formation RI					
6. Principal Office Address 90 Elm Street			City Providence	State RI	Zip 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Paul W. Whyte			Contact Title		
Street Address 90 Elm Street			City Providence	State RI	Zip 02903
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Paul W. Whyte			Manager Name		
Street Address 90 Elm Street			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. 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 Paul W. Whyte				Date 10/13/20	
Signature of Authorized Person <i>Paul W. Whyte</i>					

MAIL TO:

Division of Business Services

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