	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business		
	148 W. River St Providence RI 0290		
HOPE	(401) 222-304		
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2020			
1. ID No. <u>001686873</u>			
2. Exact Name of the Limited Liability Company Pendo Management, LLC			
3. State of Formation			
State: MO			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>531320</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
APPRAISAL MANAGE	EMENT COMPANY		
5. Principal Office Addres	SS		
No. and Street: <u>200</u>	<u>SE DOUGLAS</u>		
	TE 200 ES SUMMIT	7: 64062	Country LIC A
	ES SUMMIT State: MC		Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: 200 SE DOUGLAS SUITE 200			
	<u>S SUMMIT</u> State: <u>MC</u>	<u>2</u> Zip: <u>64063</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Ad	dress
	First, Middle, Last, Suffix	Address, City or Town	, State, Zip Code, Country

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

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

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

Signed this 16 Day of October, 2020 at 8:40:39 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>KELLY LETTMANN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved