



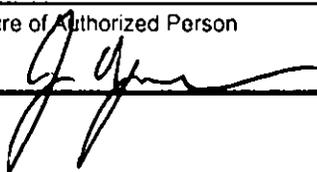
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILEDSTAMP

Annual Report for the year: 2020
Limited Liability Company

OCT 15 2020 FOR CLERK OF STATE USE ONLY
 BY 297 OS

- 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 000486450		2. Exact name of the Limited Liability Company WPS, LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Any lawful business buying, selling, developing and holding Real Estate.			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 41 West Main Street		City North Kingstown	State RI	Zip 02852	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Jeffrey Ryan		Contact Title Managing Member			
Street Address 41 West Main Street		City North Kingstown	State RI	Zip 02852	
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
Check the box to indicate an attachment <input type="checkbox"/>					
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 Jeffrey Ryan, Managing Member				Date 10.8.20	
Signature of Authorized Person 		SIGN 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