	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St	reet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Cor Annual Report Filing Period: September			
	L. 7-16-66(d), each limited liability comp hin thirty (30) days after the time presci a penalty fee of \$25.00.		
ANNUAL REPORT YEAR	R: <u>2020</u>		
<b>1. ID No.</b> <u>00165693</u>	34		
2. Exact Name of the L	imited Liability Company PTP PRO	OPERTIES, LLC	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
	Code that best describes the primary prime of the primary pre-information on <u>NAICS</u> can be found		by the entity. Download
<u>531110</u>			
4. Brief Description of t	he Character of the Business Which	is Actually Conduc	ted in Rhode Island
REAL ESTATE RENT.	<u>AL</u>		
5. Principal Office Addr	ress		
	050 MAIN ST #24 AST GREENWICH State: R	21 Zip: 02818	Country: <u>USA</u>
6. Mailing Address of L	imited Liability Company and Name	or Title of Contact	Person:
Contact Name: Contac			
No. and Street: 105	50 MAIN STREET		
No. and Street: <u>105</u> City or Town: <u>EA</u>	ST GREENWICH State: F		Country: <u>USA</u>
No. and Street: <u>105</u> City or Town: <u>EA</u>	ST GREENWICH State: F		
No. and Street: 108 City or Town: EA 7. Name and Address of	ST GREENWICH State: F	ility Company, if Ap	

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JENNIFER MASSEUR 307 WHITE HORN DR KINGSTON, RI 02881

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

**Signed this 30 Day of October, 2020 at 11:33:41 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 JENNIFER MASSEUR

Signature of Authorized Person

Form No. 632 Revised 09/07

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