	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	treet	
HOPE	(401) 222-304	40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>00165693</u> 4	4		
2. Exact Name of the Limited Liability Company PTP PROPERTIES, LLC			
3. State of Formation			
State: <u>RI</u>			
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>531110</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conduc	ted in Rhode Island
REAL ESTATE RENTA	<u>L</u>		
5. Principal Office Addre	SS		
	50 MAIN ST #24 ST GREENWICH State: I	<u>RI</u> Zip: <u>02818</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact	Person:
Contact Name: Contact No. and Street: 105	Title: 0 MAIN STREET		
	ST GREENWICH State: I	<u>RI</u> Zip: <u>02818</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		ldress
	First, Middle, Last, Suffix	Address, City or Town	a, State, Zip Code, Country
	RHODE ISLAND - DO NOT ALTER		

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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