RI SOS Filing Number: 202075903510 Date: 11/17/2020 4:00:00 PM

State of Rhode Islan	nd			_		
Department of	f State - Bu	siness Servi	ices Division		FILEDMP	
Annual Report for the year: 2020						
imited Liability Com	<del></del>		NOV 17 2020			
→ Filing period: Septemi		ber 1		<b>5</b> ) (	2014	
→ Filing Fee: \$50.00				BY		
→ Penalty: Additional \$25	5.00 fee if form	is not filed by Di	ecember 1.		$\cap$	
Entity ID Number	2 Exact na	2 Exact name of the Limited Liability Company				
1694352	LSS, LLC	LSS, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
551590		)	LIE MMINE	Martin		
5. State of Formation	$\neg \mid  \lor$	sled by	toll Moneger	W/64		
Rhode Island						
6. Principal Office Address	<u></u>		City	State	Zip	
126 Dellwood Road			Cranston	RI	02920	
7. Mailing Address of Limited		ny and Name or		<b>,</b>	•	
Contact Name Sandeep Jaiswal			Contact Title Member			
Street Address P.O. Box 8569			City Cranston	State RI	Z <sub>1</sub> p 02920	
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - 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	
		1 .		Check the box to	indicate an attachment	
9. The Resident Agent inform	nation currently	of record with the	RI Department of State is acc	curate. Changes requir	e filing Form 642.	
Under penalty of perjury, I statements, and that all sta			examined this report, includi true and correct.	ing any accompanyin	g schedules and	
Name of Authorized Person	//		Date			
Sandeep Jaiswal				10-29-20		
Signature of Authorized Pers	son		7	ı		

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov