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

AMENDED

Annual Report for the year: 2020
Limited Liability Company

→ Filing period: September 1 - November 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by December 1.

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1. Entity ID Number	2. Exact name of the Limited Liability Company		
001661665	**Square Capital, LLC**		
3. NAICS Code **522110**	4. Brief description of the character of business conducted in Rhode Island **Financial services**		
5. State of Formation **DE**			
6. Principal Office Address **1455 Market Street, 6th Floor,**	City **San Francisco**	State **CA**	Zip **94103**

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name **Cassius Sangco**	Contact Title **Corporate Paralegal**		
Street Address **1455 Market Street, 6th Floor,**	City **San Francisco**	State **CA**	Zip **94103**

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**					
Manager Name **Benjamin Gray**			Manager Name		
Street Address **1455 Market Street, 6th Floor,**			Street Address		
City **San Francisco**	State **CA**	Zip **94103**	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

Check the box to indicate an attachment ☐

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	Date
Agnes Jensen	**3/24/2021**
Signature of Authorized Person Agnes J. 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

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FORM 632 - Revised: 10/2017