



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**  
**APR 17 2024**  
 BY 391000

**Annual Report for the year:** 2024  
**Limited Liability Company**

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

|   |  |   |                |
|---|--|---|----------------|
| 1. Entity ID Number<br>001694352  |  | 2. Exact name of the Limited Liability Company<br>LSS, LLC  |                |
| 3. NAICS Code<br>531390   |  | 4. Brief description of the character of business conducted in Rhode Island<br>Real estate management |                |
| 5. State of Formation<br>Rhode Island   |  |   |                |
| 6. Principal Office Address<br>126 Dellwood Road  |  | City<br>Cranston  | State<br>RI    |
| Zip<br>02920  |  |   |                |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |   |                |
| Contact Name Sandeep Jaiswal  |  | Contact Title Member  |                |
| Street Address P.O. Box 8569  |  | City Cranston   | State RI       |
| Zip 02920   |  |   |                |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.   |  |   |                |
| <i>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.</i> |  |   |                |
| Name of Authorized Person<br>Sandeep Jaiswal  |  |   | Date<br>4-8-24 |
| Signature of Authorized Person<br>  |  |   |                |

**MAIL TO:**  
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