	State of Rhode			Fee: \$50.00			
	Office of the Secret Division Of Busines 148 W. River S Providence RI 029 (401) 222-30	s Services Street 04-2615					
Foreign Business Corporat Annual Report Filing Period: February 1 - May	tion						
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.							
ANNUAL REPORT YEAR: 2023	3						
1. Corporate ID No. 00173	<u>6921</u>						
2. Name of Corporation Arcad	lian Telepsychiatry Florida	<u>a P.A.</u>					
3. Street Address Principal B	usiness Office:						
No. and Street: <u>141 PARKI</u>	ER ST. SUITE 306						
City or Town: <u>MAYNAR</u>	<u>D</u> St	ate: <u>M A</u>	Zip: <u>01754</u>	Country: <u>USA</u>			
4. Business Phone No.							
<u>8669912103</u>							
5. State of Incorporation							
State: <u>FL</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>621330</u>							
6. Brief Description of the Cha	6. Brief Description of the Character of Business Conducted in Rhode Island						
TO ENGAGE IN THE PRACTICE OF MEDICINE							
7. Names and Addresses of the Officers and Directors:							
All officers and directors must be listed.							
Title	Individual Name First, Middle, Last, Suffix	Address	Addres , City or Town, Stat	SS e, Zip Code, Country			

PRESIDENT	MICHAEL ANDERSON M.D.	141 PARKER STREET, SUITE 306 MAYNARD, MA 01754 USA	
8. Shares Authorized an	d Issued		

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CWP		\$0.0100	100.00	100

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 15 Day of February, 2023 at 2:36:24 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By MARK KOCH

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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