

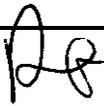


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 BUS. SVCS. DIV.
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Annual Report for the year: 2016
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.

1. Entity ID Number 158983		2. Exact name of the Limited Liability Company Lifestar Medical Transportation, LLC			
3. NAICS Code 48-49 - Transportation and <input checked="" type="checkbox"/>		4. Brief description of the character of business conducted in Rhode Island To conduct a medical transportation business and do all things incidental thereto.			
5. State of Formation RI					
6. Principal Office Address 267 Jenckes Hill Road		City Smithfield	State RI	Zip 02917	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Rocco Gesualdi		Contact Title Authorized Member			
Street Address 267 Jenckes Hill Road		City Smithfield	State RI	Zip 02917	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - 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
Check the box to indicate an attachment: <input type="checkbox"/>					
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 Rocco Gesualdi				Date 4-18-17	
Signature of Authorized Person 		SIGN DOCUMENT HERE			

FILED

APR 24 2017

BY KL 301802
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MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov