State of Rhode Island and Providence Plantations
Office of the Secretary of State

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Domestic Limited Liability Company
Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2017

1. ID No. 000153257

2. Exact Name of the Limited Liability Company PK HEALTH, LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.

531120

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

REAL ESTATE HOLDING COMPANY

5. Principal Office Address

No. and Street: 250 WAMPANOAG TRAIL, UNIT 301
City or Town: EAST PROVIDENCE State: RI Zip: 02915 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: KAREN MORRONE Contact Title: OWNER
No. and Street: 250 WAMPANOAG TRAIL, UNIT 301
City or Town: EAST PROVIDENCE State: RI Zip: 02915 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	KAREN A MORRONE	250 WAMPANOAG TRAIL, UNIT 301 EAST PROVIDENCE, RI 02914- USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

PHILIP M. SLOAN, JR. 250 WAMPANOAG TRAIL RIVERSIDE , RI 02915

Signed this 22 Day of September, 2017 at 10:29:43 AM by the authorized person. *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By KAREN MORRONE
Signature of Authorized Person

Form No. 632
Revised 09/07