RI SOS Filing Number: 201750557530 Date: 9/27/2017 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017

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	1		d Liability Company			
799589	Physical Nutrition, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
62 \ 760	Healthcare consulting on topics such as physical therapy and nutrition and any other					
5. State of Formation	lawful business.					
Rhode Island						
6. Principal Office Address			City	State	Zıp	
27 South River Drive			Narragansett	RI	02882	
7. Mailing Address of Limited Lia	ability Compar	ny and Name or	Title of Contact Person			
Contact Name Jerome Rao			Contact Title			
Street Address 27 South River Drive			City Narragansett	Stale RI	^{Zip} 02882	
	nd addresses) of the Limited	Liability Company, IF APPLICABI	.E - DO NOT LIST I	MEMBERS	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
Manager Name N/A			Manager Name N/A			
Street Address	reet Address Street Address					
City	State	Zip	City	State	Zip	
		<u>_</u>		Check the box to i	ndicate an attachment	
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 dec statements, and that all states			examined this report, including true and correct.	any accompanyin	g schedules and	
Name of Authorized Person						
Jerome Rao						
Signature of Authorized Person						
					· ·	

MAIL TO:

Division of Business Services

148 W. River Street, Providence. Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED
SEP 27 2017
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