RI SOS Filing Number: 201750705940 Date: 9/28/2017 4:00:00 PM

(RE)	State of Rhode	Island
	Departmen	t of

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 485579	2. Exact name of the Limited Liability Company FAMILY CONNECTIONS, LLC					
3. NAICS Code ()))) 5. State of Formation RI	4. Brief description of the character of business conducted in Rhode Island MENTAL HEALTH THERAPIST					
6. Principal Office Address 1643 WARWICK AVENUE			City WARWICK	State RI	Z.p 02889	
7. Mailing Address of Limited Lia		ny and Name or	.			
Contact Name REBECCA CARTER			Contact Title MEMBER			
Street Address 1643 WARWICK AVENUE		City WARWICK	State RI	^{Zıp} 02889		
8. List ALL managers (names a	nd addresses	s) of the Limited	Liability Company, IF APPLICAB	BLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Ζıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	1			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 Fling Form 642.						
	clare and affi	irm that I have	examined this report, including			
Name of Authorized Person Date						
REBECCA GARTER / 901/17						
Signature of authorized Person SIGN DOCUMENT HERE						

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 2 8 2017

BY 9275 1M

FORM 632 - Revised: 08/201