s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00	
	Division Of Business 148 W. River St Providence RI 0290	reet		
HOPE	(401) 222-304	40		
Limited Liability Com	pany			
Annual Report Filing Period: September 1	- November 1			
	7-16-66(d), each limited liability comp	anv failing or refusing		
to file its annual report withi	in thirty (30) days after the time presci			
16-66(b&c)) is subject to a				
ANNUAL REPORT YEAR:	<u>2017</u>			
1. ID No. <u>001336399</u>)			
2. Exact Name of the Lin	mited Liability Company <u>KEYST(</u>	DNE AUDIOLOGY, LLC		
3. State of Formation				
State: <u>RI</u>				
	ARTICLE III			
-	Code that best describes the primary e information on <u>NAICS</u> can be found		/. Download	
<u>621399</u>				
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rho	ode Island	
AUDIOLOGY				
5. Principal Office Addre	SS			
No. and Street: 400	BALD HILL ROAD			
	TE 529	DI 7: 02006 Count		
City or Town: <u>WA</u>	<u>RWICK</u> State	: <u>RI</u> Zip: <u>02886</u> Countr	ry: <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact Title: No. and Street: 400 BALD HILL ROAD				
SUIT	E 529			
City or Town: WAR	<u>RWICK</u> State:	<u>RI</u> Zip: <u>02886</u> Countr	ry: <u>USA</u>	
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name	Address		
MANAGER	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country	

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
MANAGER	KRISTEN C. RUBIN, C/O MCLAUGHLIN &	148 WEST RIVER STREET, SUITE 1E	

QUINN, LLC

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JEFFREY B. CIANCIOLO, ESQ. 148 WEST RIVER STREET, SUITE 1E PROVIDENCE, RI 02904

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 20 Day of October, 2017 at 9:33:45 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 <u>KRISTEN RUBIN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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