RI SOS Filing Number: 201752319280 Date: 10/26/2017 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.

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1. Entity ID Number 001031620		2. Exact name of the Limited Liability Company Premier Compounding Center, LLC					
3. NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island					
325412	Compou	Compounding of Prescription Medicines.					
5. State of Formation	_						
Rhode Island					;		
Principal Office Address			City	State	Zip		
137 Chase Road			Portsmouth	RI	02871		
7. Mailing Address of Limite	d Liability Compa	any and Name o	r Title of Contact Person				
Contact Name Joshua R. Holland			Contact Title Attorney/Agent				
Street Address 3913 Main Road, Unit E			City Tiverton	State RI	^{Z_{ID}} 02878		
8. List ALL managers (nam	es and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Z:p		
		1		Check the box to	indicate an attachment		
9. Resident Agent in Rhode	Island, This infer:	mation is currently	of record with the Department of St	ate. Changes require filir	ng Form 642.		
Under penalty of perjury, statements, and that all st			examined this report, includi true and correct.	ng any accompanyin	g schedules and		
Name of Authorized Person				Date	10/0		
Joshua R. Holland				101	19 [1]		
Signature of Authorized Per	son W	SIGi	N DOCUMENT HERE				
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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 10:33 FIL

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