Annual Report for th Limited Liability Con → Filing period: Septem → Filing Fee: \$50.00	mpany		-	· /
1. Entity ID Number 000315838	2. Exact name of the Limited Liability Company JILLIAN FENTON, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island Psychotherapy / Counseling Services (Assessment, Consultation o Treatment)			
5. State of Formation				
_		City	State	Zip
RI	ve, Suite A4	City Portsmouth	State R1	Zip 02871
R 1 6. Principal Office Address 11 King Charles Driv	d Liability Company and Name or Title	Portsmouth		'
R 1 6. Principal Office Address 11 King Charles Driv	d Liability Company and Name or Title	Portsmouth		'

City Zip Zip State City State Check the box to indicate an attachment 9. 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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Name of Authorized Person Date 8/13/2018. JILLIAN FENTON Signature of Authorized Person

Manager Name

Street Address

Manager Name

Street Address

City

MAIL TO:

Manager Name

Street Address

Manager Name

Street Address

City

Division of Business Services

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

State

Zip

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED AUG 1 7 2018

State

Zip