

Annual Report for the year: 2018
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.

\$ - FILED -
- OCT 0 9 2018 STAMP
BY 3674

1. Entity ID Number 1052379	2 Exact name of the Limited Liability Company University Medical Weight Management, LLC				
3. NAICS Code	4 Brief description of the character of business conducted in Rhode Island				
621111	Medical Weight Management				
5. State of Formation					
Rhode Island					
6. Principal Office Address			Cıty	State	Zıp
390 Tollgate Road, Suite 108	1		Warwick	RI	02886
7. Mailing Address of Limited L	iability Compa	any and Name o			
Contact Name Keith L. Callaha	n, MD		Contact Title Member		
Street Address 390 Tollgate Road, Suite 108			City Warwick	State RI	Zıp <b>02886</b>
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
Manager Name	·· • · · ·		Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
	_1	1		Check the box to	indicate an attachment
9. Resident Agent in Rhode Isl	and This inforr	mation is currently	of record with the Department of S	tate. Changes require fili	ng Form 642
Under penalty of perjury, I destatements, and that all state			examined this report, includi true and correct.	ng any accompanyin	ng schedules and
Name of Authorized Person		Date			
Keith L. Callahan, MD				10/2	110
Signature of Authorized Person	n	SIG	N 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