



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

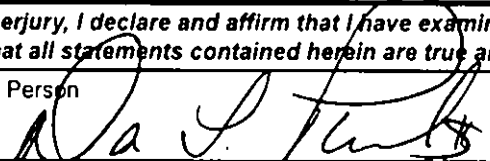
Annual Report for the year: 2018

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.

1. Entity ID Number 788551		2. Exact name of the Limited Liability Company MedAlt-ME, LLC.			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Investment group and any other lawful purpose			
5. State of Formation Rhode Island					
6. Principal Office Address 66 Pavilion Avenue			City Providence	State RI	Zip 02905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Stephen C. Mackie, Esq.			Contact Title Attorney		
Street Address 681 Smith Street			City Providence	State RI	Zip 02908
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 David L. Piccoli, II				Date 9/26/18	
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

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