State of Rhode Island and Providence Plantations Fee: \$50.00		
	Office of the Secretar	ry of State
	Division Of Business S 148 W. River Str	
	Providence RI 02904	4-2615
HOPE	(401) 222-304	.0
Limited Liability Company Annual Report Filing Period: September 1 - November 1		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.		
ANNUAL REPORT YEAR: 2018		
1. ID No. <u>000831697</u>		
2. Exact Name of the Limited Liability Company <u>CONVERGENCERI, LLC</u>		
3. State of Formation		
State: <u>RI</u>		
ARTICLE III		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.		
<u>511199</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island		
HEALTHCARE-SPECIFIC REPORTING AND PUBLICATION		
5. Principal Office Address		
No. and Street:1301 ATWOOD AVENUE, SUITE 215NCity or Town:JOHNSTONState:RIZip:02919Country:USA		
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: Contact Title: No. and Street: PANNONE LOPES DEVEREAUX & O'GARA LLC		
City or Town: JOHNSTON	<u>OOD AVENUE, SUITE 215N</u> N	State: <u>RI</u> Zip: 02919Country: USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS		

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

KAS R. DECARVALHO, ESQ. 1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919

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

**Signed this 30 Day of November, 2018 at 10:35:30 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>KAS R. DECARVALHO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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