



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, Secretary of State

May 13, 2019

SHINE PHYSICAL THERAPY, LLC
c/o DIANE C. GANNON
393 BUTTERNUT DRIVE
NORTH KINGSTOWN, RI 02852

RE: Entity ID # 000509820
SHINE PHYSICAL THERAPY, LLC

Dear Sir or Madam:

The Division of Business Services of the Office of the Secretary of State has yet to receive your Annual Report for the year **2018**.

Pursuant to the provisions set forth in Section 7-16-41 of the General Laws of the State of Rhode Island, the Certificate of Organization/Registration of the above-named entity will be revoked after 60 days from the date of this notice for failure to file the report.

To file an Annual Report online using a credit card visit www.sos.ri.gov/business. If you do not have a CID and PIN or have forgotten your CID and/or PIN, please contact us at corp_pin@sos.ri.gov.

If you prefer to use cash or check, visit www.sos.ri.gov/business to download a form. You can mail the form to us with your payment or visit our office to file in person. Of course, we will provide a hardcopy of the Annual Report form upon request.

R.I.G.L. 7-16-6(d) states that any limited liability company failing or refusing to file its annual report for any year within thirty (30) days after the time prescribed by law is subject to a penalty fee of \$25.00. **Please file your Annual Report for the year 2018 along with payment in the amount of \$75.00 that includes both the annual report filing fee and required penalty fee.** The filing must be made with the Office of the Secretary of State, Division of Business Services, within the next sixty (60) days to ensure your authority to conduct business will remain intact. If you have any questions, or if we can be of any assistance, please do not hesitate to call the Division of Business Services at (401) 222-3040.

Sincerely,

Nellie M. Gorbea
Secretary of State

Division of Business Services, 148 West River Street, Providence, RI 02904