



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.

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1 Entity ID Number 000796531		2. Exact name of the Limited Liability Company ORTHOPEDIC URGENT CARE, LLC	
3 NAICS Code 621111		4. Brief description of the character of business conducted in Rhode Island OPERATION OF AN ORTHOPEDIC URGENT CARE CENTER	
5. State of Formation RI			
6 Principal Office Address 588 PAWTUCKET AVENUE		City PAWTUCKET	State RI
		Zip 02860	
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name STEVEN L. BLAZAR, MD		Contact Title MEMBER	
Street Address 588 PAWTUCKET AVENUE		City PAWTUCKET	State RI
		Zip 02860	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name STEVEN L. BLAZAR, MD		Manager Name	
Street Address 588 PAWTUCKET AVENUE		Street Address	
City PAWTUCKET	State RI	City	State
Zip 02860		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		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 STEVEN L. BLAZAR, MD		Date 7/20/19	
Signature of Authorized Person <i>Steven Blazar</i>			

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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