s s	tate of Rhode Island and Pro Office of the Secreta	
	Division Of Business 148 W. River S	
HOPE	Providence RI 0290 (401) 222-304	
Limited Liability Com Annual Report Filing Period: September 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.	
ANNUAL REPORT YEAR: 2019		
1. ID No. <u>000151882</u>		
2. Exact Name of the Limited Liability Company <u>COUNSELING RESOURCES GROUP, 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>621330</u>		
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island		
MENTAL HEALTH SERVICES		
5. Principal Office Addre	SS	
	DUKE STREET ST GREENWICH State: H	<u>RI</u> Zip: <u>02818</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: MICHELLE MATHIESEN Contact Title: LICSW		
	<u>DUKE STREET</u> ST GREENWICH State: F	<u>RI</u> Zip: <u>02818</u> Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS		
Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	MICHELLE MATHIESEN	21 DUKE STREET EAST GREENWICH, RI 02818- USA

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

MICHELLE MATHIESEN 21 DUKE STREET EAST GREENWICH, RI 02818

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

Signed this 10 Day of October, 2019 at 12:55:12 PM 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 MICHELLE MATHIESEN

Signature of Authorized Person

Form No. 632 Revised 09/07

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