



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

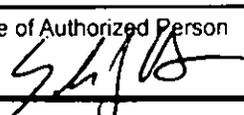
OCT 28 2019

BY 1359 OS

Annual Report for the year: 2019

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 001678383		2. Exact name of the Limited Liability Company Ocean State, LLC			
3. NAICS Code 622110		4. Brief description of the character of business conducted in Rhode Island provide urgent medical care services			
5. State of Formation Delaware					
6. Principal Office Address 2140 Mendon Road			City Cumberland	State RI	Zip 02864
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Sarah Charette			Contact Title		
Street Address 2140 Mendon Road			City Cumberland	State RI	Zip 02864
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.					
<i>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.</i>					
Name of Authorized Person Sarah Charette				Date 10/25/19	
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