



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2020  
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.

FILED 82

SEP 03 2020

107

1. Entity ID Number <u>001702702</u>		2. Exact name of the Limited Liability Company <u>Mindwell Psychology LLC</u>	
3. NAICS Code <u>621330</u>		4. Brief description of the character of business conducted in Rhode Island <u>psychologist</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>38 North Court St.</u>		City <u>Providence</u>	State <u>RI</u> Zip <u>02903</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Livia Freier</u>		Contact Title	
Street Address <u>38 North Court St.</u>		City <u>Providence</u>	State <u>RI</u> Zip <u>02903</u>
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	City	State Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	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.			
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 <u>Livia Freier</u>		Date <u>9/3/2020</u>	
Signature of Authorized Person 		SIGN DOCUMENT HERE	

## MAIL TO:

Division of Business Services

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