	State of Rhode Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street Providence RI 02904-2615			
HOPE	(401) 222-304		
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2020			
1. ID No. 000107638			
2. Exact Name of the Limited Liability Company <u>BODY-IN-SYNC THERAPIES, 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>812199</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
CONSULTANT AND BODY WORK			
5. Principal Office Address			
No. and Street: <u>154 MOHAWK TRAIL</u>			
City or Town: $\underline{CRANSTON}$ State: $\underline{RI}$ Zip: $\underline{02921}$ Country: $\underline{USA}$			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: PAULA A. CARDILLO Contact Title: MANAGER			
	MOHAWK TRAIL NSTON State:	RI Zip: <u>02921</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	Ado	Iress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
MANAGER	PAULA A CARDILLO	154 MOHAWK TRAIL CRANSTON, RI 02921 USA	

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

PAULA A. CARDILLO 154 MOHAWK TRAIL CRANSTON, RI 02921

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

**Signed this 19 Day of September, 2020 at 5:42:14 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 PAULA A. CARDILLO

Signature of Authorized Person

Form No. 632 Revised 09/07

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