	State of Rhode Office of the Secreta		Fee: \$50.00	
	Division Of Business			
	148 W. River St Providence RI 0290			
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. <u>001682856</u>				
2. Exact Name of the Limited Liability Company <u>RXSENSE LLC</u>				
3. State of Formation				
State: DE				
	ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.				
<u>561490</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
TO PROVIDE PHARMACY BENIFITS MANAGEMENT SERVICES				
5. Principal Office Address				
	<u>9 HIGH ST.</u> 3TH FLOOR			
	OSTON State: MA	Zip: <u>02110</u> Countr	y: <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact Title:				
No. and Street: <u>99 HIGH ST.</u> 28TH FLOOR				
	DSTON State: MA	Zip: 02110 Countr	y: <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	

SARAH MULLINS

99 HIGH ST., SUITE 2800

MANAGER

		BOSTON, MA 02110 USA
MANAGER	BENJAMIN R. PRESTON	99 HIGH ST., SUITE 2800 BOSTON, MA 02110 USA
MANAGER	JOE KERN	99 HIGH ST., SUITE 2800 BOSTON, MA 02110 USA
MANAGER	GREGG KELLY	99 HIGH ST., SUITE 2800 BOSTON, MA 02110 USA
MANAGER	BENJAMIN C. ADAMS	99 HIGH ST.,SUITE 2800 BOSTON, MA 02110 USA
MANAGER	RICHARD A. BATES	99 HIGH ST., SUITE 2800 BOSTON, MA 02110 USA

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

Signed this 5 Day of October, 2020 at 3:54:52 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 <u>GREGG KELLY</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved