	State of Rhode I Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St		
	Providence RI 0290		
HOPE	(401) 222-304		
Limited Liability	Company mber 1 - November 1		
n accordance with o file its annual rep	R.I.G.L. 7-16-66(d), each limited liability comp ort within thirty (30) days after the time prescr ct to a penalty fee of \$25.00.		
ANNUAL REPORT	YEAR: <u>2019</u>		
1. ID No. <u>001</u>	<u> 578929</u>		
2. Exact Name of	the Limited Liability Company Mobile C	rthotic Services LL	<u>C</u>
3. State of Forma	tion		
State: <u>RI</u>			
	ARTICLE III		
•	IAICS Code that best describes the primary I re. More information on <u>NAICS</u> can be found		by the entity. Download
<u>621999</u>			
4. Brief Descriptic	n of the Character of the Business Which	is Actually Conduc	ted in Rhode Island
<u>A PRIMARILY N</u> AND	10BILE SERVICE PROVIDING EXAM	INATION BY A L	ICENSED DOCTOR,
	USTOM MOLDED ORTHOTICS WHIC	H ARE USED TO	TREAT A NUMBER
OF			·
BIOMECHANIC	AL AND ORTHOPEDIC CONDITIONS	<u>b.</u>	
5. Principal Office	Address		
No. and Street:	33 SYMONDS AVE		
City or Town:	WARWICK State: <u>R</u>	<u>I</u> Zip: <u>02889</u>	Country: USA
6. Mailing Addres	s of Limited Liability Company and Name	or Title of Contact	Person:
	Contact Title:		
No. and Street: City or Town:	<u>33 SYMONDS AVE</u> WARWICK State: R	Zip: 02889	Country: USA
		<u> </u>	<u></u>
7. Name and Add DO NOT LIST N	ess of Each Manager of the Limited Liab EMBERS	ility Company, if Ap	oplicable.
Title	Individual Name	Αα	ldress

First, Middle, Last, Suffix

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

REGISTERED AGENTS INC. 47 WOOD AVENUE, SUITE 2 BARRINGTON, RI 02806

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

Signed this 21 Day of October, 2020 at 4:08:32 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>DOMINIC RODA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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