

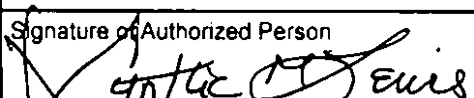


State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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  
OCT 26 2020  
STAMP  
FOR  
REGISTRATION STATE  
US 30 JULY  
BY LS DS

1. Entity ID Number <b>1659918</b>		2. Exact name of the Limited Liability Company <b>SOUTH COUNTY THERAPY, LLC</b>			
3. NAICS Code <b>621330</b>		4. Brief description of the character of business conducted in Rhode Island <b>TO PROVIDE INDIVIDUAL, MARRIAGE, CHILD AND FAMILY COUNSELING AND THERAPY.</b>			
5. State of Formation <b>RHODE ISLAND</b>					
6. Principal Office Address <b>23 NORTH ROAD, SUITE A-24</b>		City <b>WAKEFIELD</b>		State <b>RI</b>	Zip <b>02879</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>CYNTHIA M. LEWIS</b>			Contact Title <b>MEMBER</b>		
Street Address <b>PO BOX 5707</b>			City <b>WAKEFIELD</b>		State <b>RI</b> Zip <b>02879</b>
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 <b>CYNTHIA M. LEWIS, MEMBER</b>				Date <b>10/19/20</b>	
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](http://www.sos.ri.gov)