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2020 OCT 30 P 12: 08

State of Rhode Island
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.

1. Entity ID Number 149736	2. Exact name of the Limited Liability Company Mueller Aesthetic, LLC			
3. NAICS Code 812112	4. Brief description of the character of business conducted in Rhode Island To provide skin care treatment services and medical procedures.			
5. State of Formation Rhode Island				

6. Principal Office Address 33 Projac Point Road	City North Kingstown	State RI	Zip 02852

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name Margaret P. Mueller	Contact Title Authorized Person		
Street Address 33 Projac Point Road	City North Kingstown	State RI	Zip 02852

8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS

Manager Name None			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 ☐

9. The Resident Agent information currently of record with the RI Department of State is accurate. 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 Margaret P. Mueller, Authorized Person	Date October 26, 2020
Signature of Authorized Person	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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BY _Au TGH HB_
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FORM 632 - Revised: 08/2020