	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S	treet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Compa Annual Report Filing Period: September 1 - I			
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>001689629</u>			
2. Exact Name of the Limited Liability Company Cicero Dentistry LLC			
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>000000</u>			
4. Brief Description of the	Character of the Business Which	is Actually Conducted	in Rhode Island
DENTISTRY PERIODON	TIST SPECIALTY		
5. Principal Office Address	5		
No. and Street: <u>203 SOU</u> City or Town: <u>PROVID</u>	<u>TH MAIN STREET SUITE #3</u> ENCE	State: <u>RI</u> Zip: <u>0290</u>	<u>3</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: 203 SOUTH MAIN STREET SUITE #3 City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, Stat	
	IODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JOSEPH J. ALTIERI 203 SOUTH MAIN STREET SUITE #3 PROVIDENCE, RI 02903

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 November, 2020 at 9:27:47 AM 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>GIUSEPPE CICERO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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