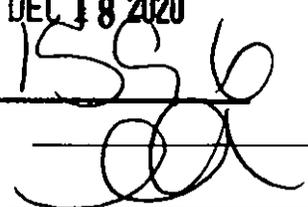


State of Rhode Island

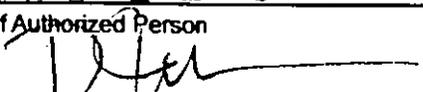
Department of State - Business Services Division

FILED

Annual Report for the year: 2020
Limited Liability Company

DEC 18 2020
 BY 1596


- 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 <u>001673889</u>	2. Exact name of the Limited Liability Company <u>Nature's Apothecary, LLC</u>		
3. NAICS Code <u>448199</u>	4. Brief description of the character of business conducted in Rhode Island <u>Natural Supplements</u>		
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>41 Washington St.</u>		City <u>Warren</u>	State <u>RI</u>
		Zip <u>02885</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Deidre Julian</u>		Contact Title <u>owner</u>	
Street Address <u>41 Washington St.</u>		City <u>Warren</u>	State <u>RI</u>
		Zip <u>02885</u>	
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
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Check the box to indicate an attachment <input type="checkbox"/>			
9. The Resident Agent Information currently of record with the RI Department of State is accurate. 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 <u>Deidre Julian</u>			Date <u>11/30/20</u>
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