State of Rhode Island
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Limited Liability Company Annual Report

Filing Period: September 1 - November 1

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: 2021

1. ID No. 001707303

2. Exact Name of the Limited Liability Company The Art of Integrity LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.

621330

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

THE ART OF INTEGRITY AS A BUISNESS PROVIDES MENTAL HEALTH COUNSELING, ORGANIZATIONAL COACHING AND CONSULTING, AND SUPERVISION FOR THERAPISTS AND MENTAL HEALTH PRACTITIONERS.

5. Principal Office Address

No. and Street: 216 PLAIN ROAD
City or Town: WEST GREENWICH State: RI Zip: 02817 Country: USA

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

Contact Name: MARSH AND MCLENNAN AGENCY LLC Contact Title:
No. and Street: 1 EXECUTIVE DR. SUITE 300
City or Town: SOMERSET State: NJ Zip: 08873 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, State, Zip Code, Country

MANAGER	MARY FRANCES PUTERA MS	216 PLAIN RD WEST GREENWICH, RI 02817 USA

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

MARY PUTERA 216 PLAIN ROAD WEST GREENWICH , RI 02817

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

Signed this 29 Day of November, 2021 at 2:55:20 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 MARY F PUTERA
Signature of Authorized Person

Form No. 632
Revised 09/07