



**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: February 1 - May 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: 2023

1. ID No. 001719556

2. Exact Name of the Limited Liability Company DIVERSITY COUNSELING, 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.

621420

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

DIVERSITY COUNSELING, LLC, IS AN OUTPATIENT MENTAL HEALTH AND
SUBSTANCE ABUSE
AGENCY. WE PROVIDE SERVICES OF SCREENING, ASSESSMENT, TREATMENT
PLANNING,
INDIVIDUAL AND GROUP COUNSELING, REFERRALS FOR SERVICES OUT OF OUR
SCOPE OF
PRACTICE, CONSULTATION, ORIENTATION, AND EDUCATION RELATED TO
MENTAL HEALTH
AND SUBSTANCE ABUSE ACCORDING TO DSM-5 AND ASAM CRITERIA. WE
PROVIDE SERVICES
BY APPOINTMENT AFTER CONDUCTING A DETAILED PHONE SCREENING TO
DETERMINE
APPROPRIATENESS TO THE LEVEL OF CARE PROVIDED BY THE AGENCY. OUR
HOURS OF

OPERATIONS ARE; MONDAY TO SATURDAY, 7AM TO 7PM.

5. Principal Office Address

No. and Street: 111 WAYLAND AVE.

City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

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

Contact Name: JOSE G. CRUZ RODRIGUEZ Contact Title: OWNER/CEO

No. and Street: 66, PLANET AVE.

PLANET AVE.

City or Town: RIVERSIDE State: RI Zip: 02915 Country: USA

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

JOSE G. CRUZ RODRIGUEZ 66 PLANET AVE RIVERSIDE , RI 02915

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

Signed this 19 Day of January, 2023 at 5:48:48 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 JOSE G. CRUZ RODRIGUEZ

Signature of Authorized Person

Form No. 632
Revised 09/07

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