	State of Rho Office of the Secr		tate	Fee: \$50.00
Division Of Business Services				
148 W. River Street				
Providence RI 02904-2615				
1630	(401) 222	-3040		
Limited Liability Annual Report	/ Company			
Filing Period: Feb	ruary 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 REPOR	T YEAR: <u>2023</u>			
1. ID No. <u>001694377</u>				
2. Exact Name of the Limited Liability Company DialCare Mental Wellness, PLLC				
3. State of Form	ation			
State: <u>TX</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>621330</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
BEHAVIORAL HEALTH SERVICE				
5. Principal Offic	ce Address			
No. and Street:	7400 GAYLORD PARKWAY			
City or Town:	FRISCO	State: <u>TX</u>	Zip: <u>75034</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name:				
No. and Street:	7400 GAYLORD PARKWAY			
City or Town:	<u>ATTN COMPLIANCE</u> <u>FRISCO</u>	State: <u>TX</u>	Zip: <u>75034</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				

 $\underline{\text{CORPORATION SERVICE COMPANY}}_{222} \underline{\text{JEFFERSON BOULEVARD, SUITE 200}} \underline{\text{WARWICK}}, \underline{\text{RI}}_{02888}$

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

Signed this 25 Day of January, 2023 at 2:19:04 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 <u>JUSTIN AYCCOK</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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