	Chode Island Fee: \$50. Secretary of State
Division Of E	Business Services
	River Street
	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. <u>001732226</u>	
2. Exact Name of the Limited Liability Company Light And Grace Wellness Spa, 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>812199</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
A BOUTIQUE WELLNESS SPA THAT OFFERS MASSAGE THERAPY AND SAUNA SERVICES.	
5. Principal Office Address	
No. and Street: <u>1648 WARWICK AVE</u> LOWER LEVEL	
City or Town: <u>WARWICK</u>	State: <u>RI</u> Zip: <u>02889</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: <u>JALISA RODRIGUES</u> Contact Title No. and Street: <u>53 SECOND POINT RD</u> LOWER LEVEL	: <u>OWNER</u>
City or Town: WARWICK	State: <u>RI</u> Zip: <u>02889</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

JALISA RODRIGUES 53 SECOND POINT ROAD WARWICK , RI 02889

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

Signed this 30 Day of January, 2023 at 3:07:02 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 JALISA RODRIGUES

Signature of Authorized Person

Form No. 632 Revised 09/07

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