



State of Rhode Island  
**Department of State - Business Services Division**

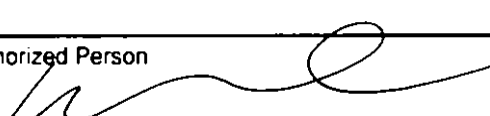
STATE

**Annual Report for the year:** 2023  
**Limited Liability Company**

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV.

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

2023 FEB 10 AM 11:31

1. Entity ID Number <b>001684895</b>		2. Exact name of the Limited Liability Company <b>AllCare Rx Solutions LLC</b>	
3. NAICS Code <b>446110</b>		4. Brief description of the character of business conducted in Rhode Island <b>Retail Pharmacy.</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>265 Waterman Street</b>		City <b>Providence</b>	State <b>RI</b>
		Zip <b>02906</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Vipul Patel</b>		Contact Title <b>Owner</b>	
Street Address <b>151 Cochituate Road</b>		City <b>Framingham</b>	State <b>MA</b>
		Zip <b>01701</b>	
8. 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 <b>Vipul Patel</b>		Date <b>2/9/2023</b>	
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](http://www.sos.ri.gov)

**FILED**  
 FEB 10 2023  
 BY WAL M3F11  
 11:36