RI SOS Filing Number: 202328494710 Date: 2/10/2023 4:00:00 PM





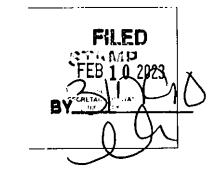
## **Department of State - Business Services Division**

Annual Report for the year: 2023 Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by May 31.



1. Entity ID Number 001671311		2. Exact name of the Limited Liability Company Nursing Placement Hospice & Palliative Care, LLC		
3. NAICS Code 621610	4. Brief description of th	4. Brief description of the character of business conducted in Rhode Island Hospice & Palliative Care Services		
5. State of Formation Rhode Island				
6. Principal Office Addres	s	City	State	Zip
588 Pawtucket Avenue		Pawtucket	RI	02860
7. Mailing Address of Lim	ited Liability Company and Nam			
Contact Name Michael Bigney		Contact Title Member		
Street Address 588 Pawtucket Avenue		City Pawtucket	State RI	<sup>Zip</sup> 02860
8. The Resident Agent in	formation currently of record with	the RI Department of State is accu	rate. Changes requir	e filing Form 642.
	y, I declare and affirm that I ha statements contained herein	ve examined this report, including are true and correct.	g any accompanyin	g schedules and
Name of Authorized Person			Date	
Name of Authorized Fers	Michael Bigney		1/4/2023	

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov