RI SOS Filing Number: 202330254940 Date: 3/7/2023 4:00:00 PM

2. Exact name of the Limited Liability Company



State of Rhode Island

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

Imaging RI, LLC

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

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

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

1. Entity ID Number

5. State of Formation

6. Principal Office Address

1526 Atwood Avenue, Stc. 200

Contact Name Sumit Kumar Das, M.D.

3. NAICS Code

Rhode Island

1673715

999999

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

FILED

MAR 07 202

4. Brief description of the character of business conducted in Rhode Island To hold equipment for the practice: Brain and Spine Neurological Institute State Zip RI 02919

Zip 02919

Street Address 1526 Atwood Avenue, Ste. 200 City Johnston 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.

City

Johnston

Contact Title Member

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.

Name of Authorized Person

Sumit Kumar Das, M.D.

Signature of Authorized Person

3-1-2023

State RI

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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