



State of Rhode Island

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.

FILED

MAR 07 2023

BY

1. Entity ID Number 1740365		2. Exact name of the Limited Liability Company Associates in Nutrition, LLC	
3. NAICS Code 621111		4. Brief description of the character of business conducted in Rhode Island To provide dietician and nutrition services via tele-nutrition.	
5. State of Formation Rhode Island			
6. Principal Office Address 1145 Reservoir Avenue		City Cranston	State RI
		Zip 02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Irving T. Gilson, M.D		Contact Title	
Street Address 1145 Reservoir Avenue		City Cranston	State RI
		Zip 02920	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
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 Irving T. Gilson, M.D		Date 3/1/23	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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