

2022

Annual Report for the year: **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.

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2023 MAR 16	P	3:	0			

1. Entity ID Number	2. Exact name of the Limited Liability Company						
001680408	Practice Exchange LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
541611	Business Brokerage firm						
5. State of Formation							
KL							
6. Principal Office Address	/ -	City Providence	State	Zip			
128 Dorrance S	- 630	Movidence	[5. <b>38</b> 2	02903			
7. Malling Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Norman (Celly		Contact Title President					
Street Address 128 Parra	mce st, 630	city Providence	State 2	Zip 02903			
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 — Fo yve st W. Km		n	Date 03/16/23				
Signature of Authorized Person							

MAR 1 6 2023 BY Zen R7

MAIL TO:

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

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