



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.

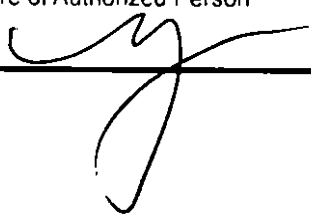
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APR 18 2023

BY

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1. Entity ID Number 001686616		2. Exact name of the Limited Liability Company RHODE ISLAND NATURAL MEDICINE, LLC	
3. NAICS Code 446199		4. Brief description of the character of business conducted in Rhode Island NATURAL/ALTERNATIVE MEDICINE	
5. State of Formation RI			
6. Principal Office Address 35 SOUTH ANGELL STREET, SUITE 7		City PROVIDENCE	State RI
		Zip 02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name BRIDGET CASEY		Contact Title MEMBER	
Street Address 15 CASTLE STREET, UNIT 5		City EAST GREENWICH	State RI
		Zip 02818	
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 BRIDGET CASEY		Date 3/17/23	
Signature of Authorized Person 			

## MAIL TO:

Division of Business Services

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