

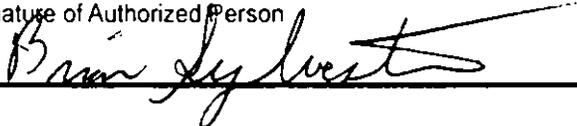


State of Rhode Island  
**Department of State - Business Services Division**

**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**  
**MAY 01 2023**  
 BY 4051  
 DS

1. Entity ID Number 000555473		2. Exact name of the Limited Liability Company BRISAN RECOVERY SUPPORT SERVICES, LLC	
3. NAICS Code 812990		4. Brief description of the character of business conducted in Rhode Island SUPPORT SERVICES FOR ADULT MEN & WOMEN RECOVERING FROM SUBSTANCE USE DISORDER, SERVICES INCLUDE HOUSING, RECOVERY COACHING, CASE MANAGEMENT AND OTHER SUPPORTIVE SERVICES.	
5. State of Formation RI			
6. Principal Office Address 1308 ATWOOD AVENUE		City JOHNSTON	State RI
		Zip 02919	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name BRIAN SYLVESTRE		Contact Title MEMBER	
Street Address 1308 ATWOOD AVENUE		City JOHNSTON	State RI
		Zip 02919	
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 BRIAN SYLVESTRE		Date 03/01/23	
Signature of Authorized Person 			

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov