

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.

R.I. DEPT. OF STATE

2023 MAY 11 A 8: 56

1. Entity ID Number	2 Exact name of the Limited L	iability Company			
<b>,</b>	2. Exact name of the Limited Liability Company				
911802	MARY BETH KILINSKI, PSY	MARY BETH KILINSKI, PSY.D., LLC			
3. NAICS Code	4. Brief description of the chara	4. Brief description of the character of business conducted in Rhode Island			
621330	PSYCHOLOGICAL SERVICE	PSYCHOLOGICAL SERVICES			
5. State of Formation	7				
RHODE ISLAND					
6. Principal Office Address		City	State	Zip	
640 GEORGE WASHINGTON HWY, BLG B, SUITE 103-12		LINCOLN	RI	02865	
7. Mailing Address of Limited	d Liability Company and Name or Tit	le of Contact Person			
Contact Name DR. MARY BETH KILINSKI		Contact Title MEMBER			
Street Address 640 GEORGE WASHINGTON HWY, BLG B, SUI		I'. City LINCOLN	State RI	<sup>Zip</sup> 02865	
8. The Resident Agent inform	nation currently of record with the RI	Department of State is acc	urate. Changes requir	re filing Form 642.	
	declare and affirm that I have exa etements contained herein are tru		ng any accompanyin	ng schedules and	
Name of Authorized Person			Date /		
DR. MARY BETH KILINSKI, MEMBER			5/1/23		
Signature of Authorized Pers	son /		•	-	
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**FILED** 

MAY 1 1 2023

BY ML 1648

MAIL TO:

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

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