



State of Rhode Island
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Limited Liability Company
Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE **CURRENT FILING YEAR 2023**: 2023

1. ID No. 001726662

2. Exact Name of the Limited Liability Company Radiant Wellness Healing LLC

3. State of Formation

State: RI

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

455219

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

WE SPECIALIZE IN PROVIDING HEALING SERVICES, HOLISTIC WORKSHOPS, AN ASSORTMENT OF HANDCRAFTED MERCHANDISE RANGING FROM ARTISAN CRAFTS, CROCHETED KNITTED, JEWELRY, NOVELTIES ITEMS, HOME DECOR, THERAPEUTIC SOAPS, ESSENTIAL OIL BLENDS, SPRAYS, AND ASSORTED ALL NATURAL SKIN CARE. RADIANT WELLNESS HEALING CATERS TO HEALTH MINDED MEMBERS OF THE COMMUNITY WHO WISH TO IMPROVE THEIR LIVING QUALITY THROUGH USE OF HOLISTIC PRODUCTS, AND SPIRITUAL HEALING PRACTICES, IE: REIKI, REFLEXOLOGY, AROMATHERAPY, AND HYPNOTHERAPY.

5. Principal Office Address

No. and Street: 2828 HARTFORD AVE.

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 34 DAVIS RD

City or Town: NORTH SCITUATE State: RI Zip: 02857 Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

MARY ELIZABETH LIMA 34 DAVIS RD SCITUATE , RI 02857

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 30 Day of June, 2023 at 1:46:58 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MARY ELIZABETH LIMA
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2023 State of Rhode Island
All Rights Reserved