



State of Rhode Island  
Department of State - Business Services Division

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2023 SEP -6 P 1:15

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.

1. Entity ID Number <b>001708986</b>		2. Exact name of the Limited Liability Company <b>Luisa DeLuca, MS, LMHC, LLC</b>	
3. NAICS Code <b>621330</b>		4. Brief description of the character of business conducted in Rhode Island <b>Private practice psychotherapy</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>248 Laurel Lane</b>		City <b>West Kingston</b>	State <b>RI</b>
		Zip <b>02892</b>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Luisa DeLuca</b>		Contact Title <b>Manager</b>	
Street Address <b>248 Laurel Lane</b>		City <b>West Kingston</b>	State <b>RI</b>
		Zip <b>02892</b>	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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 <b>Luisa DeLuca</b>			Date <b>August 31, 2023</b>
Signature of Authorized Person <i>Luisa DeLuca</i>			

FILED

1:17pm

SEP 06 2023

BY LKS KV615

MAIL TO:

Division of Business Services

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