



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022

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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 BUS SVCS DIV

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1. Entity ID Number 001698031		2. Exact name of the Limited Liability Company DDCRX, LLC	
3. NAICS Code 446110		4. Brief description of the character of business conducted in Rhode Island Pharmacy services	
5. State of Formation Ohio			
6. Principal Office Address 2701 Highpoint Oaks, Suite 100		City Lewisville	State TX
			Zip 75067
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Todd Donnelly		Contact Title Manager	
Street Address ONE RICHMOND SQUARE, SUITE 1		City PROVIDENCE	State RI
			Zip 02906
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 Todd Donnelly		Date 10.10.23	
Signature of Authorized Person <i>Todd Donnelly</i>			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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Website: www.sos.ri.gov

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 BY YCDKY
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