



State of Rhode Island  
Department of State - Business Services Division

STAMP

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.

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BUS SVCS DIV

2023 NOV 21 A 10:16

1. Entity ID Number 001722213		2. Exact name of the Limited Liability Company MEDITELECARE OF RHODE ISLAND, LLC	
3. NAICS Code 621112		4. Brief description of the character of business conducted in Rhode Island  Telehealth provider in skilled nursing facilities	
5. State of Formation RI			
6. Principal Office Address 213 Court Street, 6th Floor		City Middletown	State CT
		Zip 06457	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Cheryl France		Contact Title Manager	
Street Address 213 Court Street, 6th Floor		City Middletown	State CT
		Zip 06457	
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 Cheryl France		Date 11/16/2023	
Signature of Authorized Person  /s/Cheryl France			

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

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