RI SOS Filing Number: 202448287270 Date: 3/8/2024 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024 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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FOR SECRETARY OF STATE USE ONLY

1. Entity ID Number 1754902	2. Exact name of the Limited Liability Company MRW Therapy, LLC			
3. NAICS Code 621330	Brief description of the character of business conducted in Rhode Island Therapy, counseling and consulting services and any other lawful business.			
5. State of Formation Rhode Island				
Principal Office Address Ostend Street		City Johnston	State RI	Z _{IP} 02919
	Liability Company and Name or 1		- 	
Contact Name Michael R. White		Contact Title Member		
Street Address 9 Ostend Street		City Johnston	State RI	^{Zip} 02919
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
Under penalty of perjury, I o statements, and that all stat	declare and affirm that I have ex tements contained herein are to	xamined this report, including rue and correct.	g any accompanying	schedules and
Name of Authorized Person			Date	
Michael R. White		2/7/24		
Signature of Authorized Person	"R Wite			

FILED

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MAIL TO:

Division of Business Services

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

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