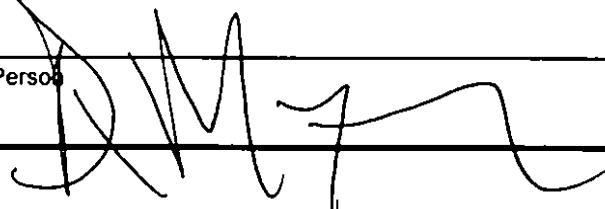


**State of Rhode Island
Department of State - Business Services Division**REC'D RIDOS ESD
MAR 14 PM 10:35:15**Annual Report for the year:** 2024
Limited Liability Company

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 1663576		2. Exact name of the Limited Liability Company Lifespan Health Alliance, LLC	
3. NAICS Code 621399		4. Brief description of the character of business conducted in Rhode Island Clinically integrated healthcare delivery partnership.	
5. State of Formation Rhode Island			
6. Principal Office Address 167 Point Street		City Providence	State RI
		Zip 02903	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Daniel Moynihan		Contact Title Authorized Representative	
Street Address 225 Chapman Street, 4th Floor		City Providence	State RI
		Zip 02905	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <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 Daniel Moynihan		Date	
Signature of Authorized Person 		2/16/24	

FILED**MAR 14 2024**
BY ML 100101406**MAIL TO:**

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