RI SOS Filing Number: 202450836130 Date: 4/11/2024 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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Entity ID Number	2 Exact name of the Limited Liability Company				
000545823	Saoirse, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
621330	Counseling services.				
5. State of Formation					
RI					
6. Principal Office Address City		State	Zip		
20 Newman Street, Suite 2003 Ru		Rumford	RI	02916	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Cara Quinn		Contact Title Authorized Person			
Street Address 20 Newman Street, Suite 2003		City Rumford	State RI	^{Z₁p} 02916	
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		Date	Date		
Cara Quinn		4/2/2	4/2/09		
Signature of Authorized Person					
(in ca					

FILED

APR 11 2024 BY 257 AA

MAIL TO:

Division of Business Services

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

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