RI SOS Filing Number: 202454499980 Date: 5/9/2024 4:00:00 PM

THE THE PARTY	

## State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 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.

2024

FIL	FD
, ,,	

MAY 09 2024

BY\_15

REC'D RIDOS BSD 24 KBY 9 FM12:00:05

1. Entity ID Number 001668086	2. Exact name of the Limite Massage Therapy	• • •				
3. NAICS Code 621399	4. Brief description of the character of business conducted in Rhode Island Provide therapeutic massage					
5. State of Formation						
6. Principal Office Address		City	State	Zip		
550 Turner Road		Middletown	RI	02842		
7. Mailing Address of Limite	d Liability Company and Name or	Title of Contact Person		1		
Contact Name  Deborah R	Deborah R. Luhrs		Contact Title Pres.			
Street Address 550 Turner Road		City Middletown	State	<sup>Zip</sup> 02842		
8. The Resident Agent infon	mation currently of record with the	RI Department of State is accur	ate. Changes requir			
9. Under penalty of perjur statements, and that all st	y, I declare and affirm that I hav atements contained herein are	e examined this report, includi true and correct.	ing any accompany	ing schedules and		
Name of Authorized Person			Date			
Deborah R. Luhrs		6/MAY 24				
Signature of Authorized Per	SOP		<u> </u>			

MAIL TO:

Division of Business Services

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

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