

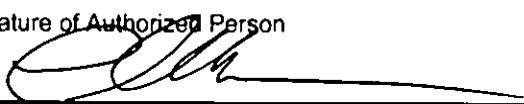


State of Rhode Island
Department of State - Business Services Division

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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 001689193		2. Exact name of the Limited Liability Company Bolger Psychotherapy & Assessments, LLC		
3. NAICS Code 621330		4. Brief description of the character of business conducted in Rhode Island Practice of psychotherapy and assessments		
5. State of Formation RI				
6. Principal Office Address 555 North Main Street #1342		City Providence	State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Chantal Bolger		Contact Title Authorized Person		
Street Address 191 Sowatts Road		City Barrington	State RI	Zip 02806
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
<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 Chantal Bolger			Date 5/8/24	
Signature of Authorized Person 				

FILED

MAY 14 2024

BY

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KS

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