



State of Rhode Island
Department of State - Business Services Division

REC'D RIDGS BSD
24 JUL 24 AM 11:38:26

Certificate of Correction

Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-16-13 the undersigned limited liability company hereby submits the following Certificate of Correction:

1. Entity ID Number: 001776387	2. The name of the limited liability company is: Santos Psychiatric Associates, LLC
3. The document to be corrected is: Articles of Organization	
4. The name of the individual(s) who signed the document being corrected is: Dayanne M. Santos	
5. The date the document being corrected was originally filed on: 07/12/2024	
6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is: name of authorized person: spelled incorrectly "Dyanne Santos."	
Check the box to indicate an attachment <input type="checkbox"/>	
7. The new corrected portion of the document states as follows: correct name of authorized person is "Dayanne ^M Santos."	
Check the box to indicate an attachment <input type="checkbox"/>	
8. As required by RIGL 7-16-67, the entity has paid all fees and taxes.	

MAIL TO:

Division of Business Services

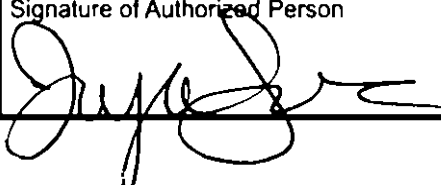
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

MS
JUL 24 2024
BY 44 HIT

Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.

Name of Authorized Person Dayanne M Santos	Street Address 79 Taft St	
City/Town Cranston	State RI	Zip Code 02905
Signature of Authorized Person 		Date 7/24/24