



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2023  
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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1. Entity ID Number <b>001726495</b>		2. Exact name of the Limited Liability Company <b>HANDS &amp; HEART HOMECARE SERVICES LLC</b>	
3. NAICS Code <b>561990</b>		4. Brief description of the character of business conducted in Rhode Island  <b>NON MEDICAL HOMECARE</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>394 METACOM AVE UNIT 48</b>		City <b>BRISTOL</b>	State <b>RI</b>
Zip <b>02809</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>NADIA CODNER</b>		Contact Title <b>OWNER</b>	
Street Address <b>394 METACOM AVE UNIT 48</b>		City <b>BRISTOL</b>	State <b>RI</b>
Zip <b>02809</b>			
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 <b>NADIA CODNER</b>			Date <b>09/20/2024</b>
Signature of Authorized Person <i>N Codner</i>			

**FILED**

**NOV 15 2024**

BY **TBARB**

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**MAIL TO:**

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