RI SOS Filing Number: 202562000490 Date: 1/6/2025 11:23:00 AM



## 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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1. Entity ID Number		2. Exact name of the Limited Liability Company				
001705696	Ruby Lee MD LL	Ruby Lee MD LLC				
3. NAICS Code 621330	· · · · · · · · · · · · · · · · · · ·	Brief description of the character of business conducted in Rhode Island     Office of Mental Helath				
5. State of Formation						
6. Principal Office Address		City	State	Zip		
10 Elmgrove Avenue		Providence	RI	02806		
7. Mailing Address of Limite	ed Liability Company and Name or	r Title of Contact Person				
Contact Name Ruby Lee	[					
Street Address 31 Sentry Hill Road		City Sharon	State MA	<sup>Zip</sup> 02067		
8. The Resident Agent infor	mation currently of record with the	e RI Department of State is acc	urate. Changes require	e filing Form 642.		
	ry, I declare and affirm that I hav tatements contained herein are		ding any accompany:	ing schedules and		
Name of Authorized Person Minshy Les Tray			Date 11/22/2024			
Signature of Authorized Per	son 53					

FILED 11:23

JAN 06 2025

BY ARJES

(Br)/

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

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