RI SOS Filing Number: 202562000300 Date: 1/6/2025 11:21:00 AM



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	2. Exact name of the Limited Liability Company						
001705696	Ruby Lee MD LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
621330	Office of Mental Helath						
5. State of Formation							
RI							
6. Principal Office Address		City	State	Zip			
10 Elmgrove Avenue		Providence	RI	02806			
7. Mailing Address of Limited L	7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Ruby Lee		Contact Title Member					
Street Address 31 Sentry Hill Road		City Sharon	State MA	^{Zip} 02067			
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			Date	1			
Minshan Leo Tsny			11/22/2024				
Signature of Authorized Person							

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JAN 06 2025

MAIL TO:

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

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