

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025

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 000156904	2. Exact name of the Limited Liability Company Neurobehavioral Consultants Strategies & Solutions, LLC				
3. NAICS Code 621410	•	Brief description of the character of business conducted in Rhode Island Provide mental health counseling and consulting.			
5. State of Formation RI					
6. Principal Office Address 2893 Post Road		City Warwick	State RI	Zip 02886	
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person	<u>l</u>		
Contact Name Dr. Jeffrey R. Brusini		Contact Title Manager			
Street Address 2893 Post Road		City Warwick	State RI	Zip 02886	
8. The Resident Agent info	rmation currently of record with t	the RI Department of State is a	ccurate. Changes requ	ire filing Form 642.	
	I declare and affirm that I hav tatements contained herein a		ding any accompany	ing schedules and	
Name of Authorized Person	n y RB NSini	-	Date 1/21/2 「		
Signature of Authorized Pe	<u> </u>				
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FILED

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 29 2025 BY 1189 AM