

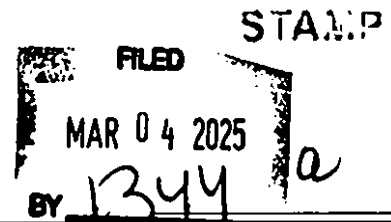


State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025

Corporation

- 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 001719471		2. Exact name of the Corporation BLYTHE GOULD LMHC, INC.		
3. Principal Office Address 465 S. WASHINGTON ST		City NORTH ATTLEBORO	State MA	Zip 02760
4. NAICS Code 621330	6. Brief description of the character of business conducted in Rhode Island MENTAL HEALTH COUNSELOR			
5. State of Incorporation MA				
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>				
President Name BLYTHE C. GOULD		Vice-President Name		
Street Address 26 HILLSIDE ROAD		Street Address		
City CUMBERLAND	State RI	Zip 02864	City	State Zip
Secretary Name		Treasurer Name		
Street Address		Street Address		
City	State	Zip	City	State Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State Zip
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
		1000	CNP	0.0000
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. 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 Representative BLYTHE C. GOULD				Date ✓ 2-10-25
Signature of Authorized Representative ✓ Blythe Gould				