RI SOS Filin	g Number: 20256701654	0 Date: 3/12/2025 4:00:	:00 PM		
State of Rhode Is Department of	land State - Business Servic	ces Division			
Annual Report for the yea			FILED		
<ul> <li>→ Filing period: February</li> <li>→ Filing Fee: \$50.00</li> </ul>			MAR 1 2 2025 BY		
1. Entity ID Number 000787811	2. Exact name of the Limited Liability Company JUST KIDS RI SICK CARE LLC				
3. NAICS Code 812990	Brief description of the character of business conducted in Rhode Island     OPERATING A SICK CARE CENTER FOR CHILDREN				
5. State of Formation Rhode Island					
6. Principal Office Address 2 MEEHAN LANE	<u> </u>	City CUMBERLAND	State RI	Zip 02864	

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

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ΩТ	he Resident Agent information currently of record with the RI Department of State is accurate	<ul> <li>Changes require filing Form 642.</li> </ul>

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.

Contact Title

City CUMBERLAND

Name of Authorized Person

Signature of Authorized Person

MAUREEN A. CROTTY MD

Street Address 2 MEEHAN LANE

Contact Name MAUREEN A. CROTTY MD

State RI

Zip 02864

MAIL TO:

**Division of Business Services** 

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

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