



State of Rhode Island
Department of State - Business Services Division

REC'D RI SOS 350
25 MAY 15 4:49:46:56

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 001735902		2. Exact name of the Limited Liability Company Healthy Expansions LLC	
3. NAICS Code 624190		4. Brief description of the character of business conducted in Rhode Island Individual therapy, counseling, art therapy & goods	
5. State of Formation R.I.			
6. Principal Office Address 10 Miner Street		City North Providence	State RI
		Zip 02904	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Asta Smith		Contact Title Owner	
Street Address SAA 10 Miner St.		City N. Providence	State RI
		Zip 02904	
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 Asta Smith		Date 3-20-2025	
Signature of Authorized Person Asta Smith			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

FILED
MAY 15 2025
BY FlygS
[Signature]