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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.

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1. Entity ID Number	2. Event name of the Limited Lin	hulder Company			
	2 Exact name of the Limited Liability Company				
1711217	Evergreen Wellness Center, LLC				
3 NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
621330	Outpatient Mental Health Services: Psychological, Neuropsychological, and				
5 State of Formation	Educational Evaluations; Individuals; Couples; and Family Therapy				
RI		·			
6. Principal Office Address	<u> </u>	City	State	Zip	
12 Ames Street		West Warwick	RI	02893	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Rebecca Uth		Contact Title Member			
Street Address 12 Ames Street		City West Warwick	State RI	^{Zip} 02893	
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 /// 2			
Rebecca Uth, Member		4/2/			
Signature of Authorized Person M. A.					

MAIL TO:

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

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

FORM 632 - Rev.sed 12/2023