

## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: **Limited Liability Company** 

2024

→ 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	2. Exact name of the Limited Liability Company			
001699516	heART & Soul Healing Art Studio LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
621330	ART THERAPY			
5. State of Formation				
RHODE ISLAND				
6. Principal Office Address		City	State	Zip
5 DIVISION STREET BOX 1		EAST GREENWICH	RI	02818
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Street Address 5 DIVISION STREET BOX 1		EAST GREENWICH	State RI	<sup>Zip</sup> 02818
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				
TIMOTHY J MURRAY 3/29/2025				
Signature of Authorized Person				
1 try / May				

MAIL TO:

**Division of Business Services** 

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FLED MAY 29 2025 SFASU