RI SOS Filing Number: 202574323260 Date: 6/6/2025 11:49:00 AM

State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 294**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.

RECEIVED BUS SYCS DIAGRAM	
2025 HAY -9 A 10: 117	

1. Entity ID Number	2. Exact name of the Limited Liability Company					
001702702	Mindwell Psychology LLL					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
621330	ac al leas phostice					
5. State of Formation	- psychology practice					
RI		•				
6. Principal Office Address		City	State	Zip		
38 Morth Cou	urt St,	Proviolence	RI	02993		
7. Mailing Address of Limited Lia	bility Company and Name or Title					
Contact Name	Contact Title					
Livia Freier		ouver				
Street Address COL	A Q.	Provideu Le	State RT	2ip 92903		
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	12.02/		
Livia trei	er		511	12025		
Signature of Authorized Person						
	900	-				

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

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

MAIL TO: