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State of Rhode Island Department of State - Business Services Division

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Annual Report for the year: Limited Liability Company

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→ Filing period: February 1 - May 1

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→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2025 AUG -7 A 10: 22

1. Entity ID Number 001778956	2. Exact name of the Limited Liability Company Newport Longevity, L.L.C.			
3. NAICS Code 621399	A. Brief description of the character of business conducted in Rhode Island Medical consultative services and health coaching.			
5. State of Formation				
6. Principal Office Address	Cit	<i>i</i>	State	Zip
87 Kent Drive	· · · · · · · · · · · · · · · · · · ·	ast Greenwich	RI	02818
7. Mailing Address of Limited	Liability Company and Name or Title of C	ontact Person	···	
Contact Name Lauren Slater		Contact Title Owner		
Street Address 87 Kent Drive		East Greenwich	State RI	^{Zip} 02818
8. The Resident Agent inform	ation currently of record with the RI Depar	rtment of State is accurate	. Changes require	e filing Form 642
9. Under penalty of perjury,	I declare and affirm that I have examin tements contained herein are true and	ed this report, including		
Name of Authorized Person			Date	
Lauren Slater			08/04/2025	
Signature of Authorized Person	5	///		
	X115	\bigcirc		

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**

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