



State of Rhode Island
Department of State - Business Services Division

STAMP

Annual Report for the year:
Limited Liability Company

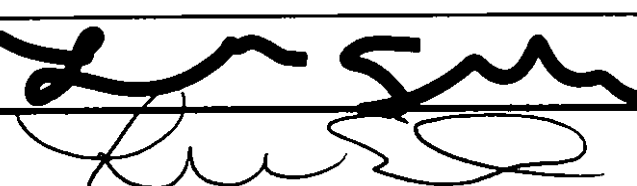
2025

- 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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BUS SVCS DIV

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FEE ONLY

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	4. Brief description of the character of business conducted in Rhode Island Medical consultative services and health coaching.		
5. State of Formation RI			
6. Principal Office Address 87 Kent Drive		City East Greenwich	State RI Zip 02818
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Lauren Slater		Contact Title Owner	
Street Address 87 Kent Drive		City East Greenwich	State RI Zip 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 Lauren Slater		Date 08/04/2025	
Signature of Authorized Person 			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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AUG 07 2025
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