s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street			
Providence RI 02904-2615 (401) 222-3040			
HOPE	(401) 222-30	+0	
Limited Liability Com	pany		
Annual Report Filing Period: September 1 - November 1			
		any failing or refusing	
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-			
16-66(b&c)) is subject to a µ	penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>000990703</u>			
2. Exact Name of the Limited Liability Company <u>EAST BAY PSYCHOLOGICAL AND</u> EDUCATIONAL CONSULTANTS, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>611519</u>			
4. Brief Description of the	e Character of the Business Which	is Actually Conducted i	n Rhode Island
PSYCHOLOGICAL AND EDUCATIONAL CONSULTANTS			
5. Principal Office Addres	SS		
	<u>NEWMAN AVENUE</u> Γ PROVIDENCE Stat	e: <u>RI</u> Zip: <u>02916</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: <u>225 NEWMAN AVENUE</u>			
		e: <u>RI</u> Zip: <u>02916</u> (Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	۵ddroe	s
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State	-

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

GEORGE PATRICK HOVARTH, ESQ. 75 PARK PLACE PAWTUCKET, RI 02860

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 20 Day of September, 2017 at 4:26:04 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>SALVATORE N. FRATANTARO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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