Date: 3/28/2022 EIG E 6/05 AMTE R.I. DEFT. OF DIV — RI SOS Filing Number: 202213585480 State of Rhode Island

Department of State - Business Services Division

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FOR SECRETARY OF STATE USE CRUT

Annual Report for the year: 2077 **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.

Entity ID Number	2. Exact name of the Limited Lia	bility Company		
000810079	Coventry Aniv	nal Hospital	LLC	
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
541940				
5. State of Formation				
A I	Veterinary	Practice		
6. Principal Office Address		City	State	Zip
2001 Noosenack Hill 1d		Country	A (02816
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Scenual Lesson		Contact Title Owner/Member		
Street Address 2091 Noosencutz 14:11 rd		City	State A (Zip 02816
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
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	
Scenned bester			3/27/	2202
Signature of Authorized Person				
NIMM Z	2/1/			

FILED

MAR 2 8 2022

MAIL TO:

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

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