Annual Report for the year: 2022 **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.

STAMP

APR 28 2022

2. Exact name of the Limited Liability Company University Gastroenterology, LLC			
Brief description of the character of business conducted in Rhode Island Pracitce of Medicine Speciality in Gastroenterology			
	City Providence	State RI	Zip 02905
bility Company and Name	or Title of Contact Person		
ie, M.D.	Contact Title Manager		
treet	City Providence	State RI	^{Zip} 02905
n currently of record with t	he RI Department of State is accura	I ate. Changes require	e filing Form 642.
lare and affirm that I have	e examined this report, including		
		Date	
Eric Berthiaume, M.D.		03/15/2022	
)	bility Company and Name ne, M.D. Street on currently of record with t	City Providence bility Company and Name or Title of Contact Person ne, M.D. City Providence Contact Title Manager City Providence Contact Title Manager City Providence	Practice of Medicine Speciality in Gastroenterology City Providence RI bility Company and Name or Title of Contact Person The, M.D. Contact Title Manager City Providence State RI In currently of record with the RI Department of State is accurate. Changes require lare and affirm that I have examined this report, including any accompanying tents contained herein are true and correct.

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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