



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Annual Report for the year: 2015

Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000821372		2. Exact name of the Limited Liability Company Lightning Intermediate Holdings, LLC			
3. State of Formation Delaware		4. Brief description of the character of business conducted in Rhode Island Development & distribution of dental & healthcare software			
5. Principal Office Address 300 Galleria Parkway, Suite 1700		City Atlanta		State GA	Zip 30339
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Alexandra Miller			Contact Title Legal & Privacy Analyst		
Street Address 300 Galleria Parkway, Suite 1700			City Atlanta		State GA
			Zip 30339		
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☒					
8. Resident Agent in Rhode Island. This information is currently of record in the Department of State. 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 Scott Zimmerman				Date 10/27/2016	
Signature of Authorized Person  SIGN DOCUMENT HERE					

FILED

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By SC 292384

MAIL TO:
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