S	itate of Rhode Island and Pro Office of the Secreta	
	Division Of Business 148 W. River St Providence RI 0290	treet 04-2615
HOPE	(401) 222-304	40
Limited Liability Com Annual Report Filing Period: September 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.	
ANNUAL REPORT YEAR:	<u>2017</u>	
1. ID No. <u>000140169</u>	2	
2. Exact Name of the Li	mited Liability Company <u>A CHIL</u>	D'S UNIVERSITY, LLC
3. State of Formation		
State: <u>RI</u>		
	ARTICLE III	
-	Code that best describes the primary e information on <u>NAICS</u> can be found	business conducted by the entity. Download online.
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhode Island
	EDUCATION PROGRAMS	
LAKET CHIEDHOOD	EDUCATION I ROOKAWIS	
5. Principal Office Addre	SS	
	S PARK AVENUEANSTONState: I	<u>RI</u> Zip: <u>02910</u> Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Person:
		IG MEMBER
	<u>PARK AVENUE</u> ANSTON State: <u>F</u>	<u>RI</u> Zip: <u>02910</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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	LYNSEY L COLGAN	695 PARK AVENUE CRANSTON, RI 02910 USA
MANAGER	JAY M COLGAN	695 PARK AVENUE

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

JAY COLGAN 695 PARK AVENUE CRANSTON, RI 02910

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

Signed this 13 Day of September, 2017 at 4:23:35 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>LYNSEY COLGAN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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