RI SOS Filing Number: 201882994900 Date: 12/20/2018 10:41:00 AM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016
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.

J.
Ja Constitution
On PARTY
To Morro
1 02 C
. 40

1. Entity ID Number	2. Exact name of the Limited Liability Company					
98341	The Learning Place, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
624410	Preschool					
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
21 Terry Lane			Chepachet	RI	02814	
7. Mailing Address of Limited Lia	ability Company	and Name or Titl	e of Contact Person			
Contact Name Bethany Zimnoch			Contact Title Owner			
Street Address 21 Terry Lane			City Chepachet	State RI	^{Zip} 02814	
8. List ALL managers (names a	nd addresses) (of the Limited Liab	ility Company, IF APPLICAE	BLE - DO NOT LIST M	EMBERS	
Manager Name Donaid A. Brush			Manager Name			
Street Address PO Box 477			Street Address			
City Harmony	State RI	^{Zip} 02829	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Islan						
Under penalty of perjury, I dec statements, and that all staten	lare and affirm tents c ợ ntaine	that I have exam d herein are true	nined this report, including and correct.	g any accompanying	schedules and	
Name of Authorized Person Date						
Bethany Zimnoch						
Signature of Authorized Person		SiA	231	w 1	0/13/18	
		1) /)	,	1 7	
MAIL TO:	,					

Division of Business Services

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

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

DEC 2 0 2018

KL66BH4

FORM 632 - Revised: 10/2017