S	tate of Rhode Island and Pro Office of the Secreta		50.00
	Division Of Business		
	148 W. River S Providence RI 0290		
HOPE	(401) 222-304		
Limited Liability Com	nany		
Annual Report			
Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc.		
16-66(b&c)) is subject to a		1000 by 10W (11.1.0.2. 7	
ANNUAL REPORT YEAR:	<u>2019</u>		
1. ID No. <u>000789068</u>	3		
2. Exact Name of the Li	mited Liability Company <u>BLOOM</u>	I, <u>LLC</u>	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
Enter the six digit NAICS (Code that best describes the primary	business conducted by the entity. Downloa	ad
-	e information on <u>NAICS</u> can be found		
<u>624410</u>			
4 Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhode Island	
4. Bhei Beschpilon of th			•
PREKINDERGARTEN	SCHOOL		
5. Principal Office Addre			
	<u>DHN CLARKE ROAD</u> DLETOWN Sta	te: RI Zip: 02842 Country: USA	
6. Mailing Address of Li	nited Liability Company and Name	e or Title of Contact Person:	
Contact Name: Contact			
	<u>HN CLARKE ROAD</u> L <u>ETWON</u> Stat	e: <u>RI</u> Zip: <u>02842</u> Country: <u>USA</u>	Ŀ
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Liab RS	ility Company, if Applicable.	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	,
MANAGER	BETHANY H. STEWART	15 GILROY STREET NEWPORT, RI 02840 USA	

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

WILLIAM W. HARVEY 97 JOHN CLARKE ROAD MIDDLETOWN, RI 02842

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

Signed this 29 Day of October, 2019 at 1:22:29 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 **BETHANY STEWART**

Signature of Authorized Person

Form No. 632 Revised 09/07

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