State of Rhode Island Department of State - Business Services Division	F FILED	STAMP
Annual Report for the year: 2020 Limited Liability Company → Filing period: September 1 - November 1 → Filing Fee: \$50.00	OCT 1 5 2020 BY 100	FOR SECRETARY OF STATE USE ONLY
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.	V	

	lo. 5 . "		41 - E PE O			
1 Entity ID Number			d Liability Company			
1666869	Navigate Behaviors, LLC					
3. NAICS Code	4 Brief description of the character of business conducted in Rhode Island					
812990	Apply behavioral analysis services for individuals with autism, developmental disabilities, and those who					
5 State of Formation	want to learn essential life-long skills					
RI						
6 Principal Office Address	l	<u>. </u>	City	State	Zip	
324 Shippeetown Road	eetown Road		East Greenwich	RI	02818	
7. Mailing Address of Limited Lia	ability Compa	ny and Name or				
Contact Name Renee Randol			Contact Title Member	Contact Title Member		
Street Address 324 Shippeetown	et Address 324 Shippeetown Road		City East Greenwich	State RI	Zip 02818	
8. List ALL managers (names a	nd addresses	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address		Street Address	Street Address			
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Check the box to indicate an attachment						
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
Under penalty of perjury, I de statements, and that all state			examined this report, including true and correct.	any accompanyin	g schedules and	
Name of Authorized Person Date						
Renee Randol			10	16/2020		
Signature of Authorized Person	∕	enail				

MAIL TO:

Division of Business Services

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

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