		State of Rh Office of the Sec		ate	Fee: \$50.00	
		Division Of Bus 148 W. Ri	ver Street			
HOPE		Providence RI (401) 22				
Limited Liabil Annual Repor Filing Period: Sep	rt					
to file its annual re	eport with	7-16-66(d), each limited liability in thirty (30) days after the time penalty fee of \$25.00.				
ANNUAL REPOR	RT YEAR:	<u>2019</u>				
1. ID No. <u>0</u> 0	00358540	<u>)</u>				
2. Exact Name of the Limited Liability Company <u>ABCYA.COM LLC</u>						
3. State of Form	mation					
State: <u>RI</u>						
		ARTICLE	: 111			
-		Code that best describes the pri e information on <u>NAICS</u> can be f	•	conducted by th	ne entity. Download	
<u>511210</u>						
4. Brief Descrip	tion of th	e Character of the Business V	Vhich is Actua	Illy Conducted	in Rhode Island	
DEVELOPME	NT OF E	DUCATIONAL SOFTWARI				
5. Principal Offi	ce Addre	SS				
No. and Street:	-	DUTH ANGELL STREET BER 333				
City or Town:	PROV	VIDENCE	State: <u>RI</u>	Zip: <u>02906</u>	Country: <u>USA</u>	
6. Mailing Addr	ess of Li	mited Liability Company and	Name or Title	of Contact Per	son:	
Contact Name: No. and Street:		UTH ANGELL STREET				
City or Town:	<u>NUMBER 333</u> <u>PROVIDENCE</u> State: <u>RI</u> Zip: <u>02906</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		Addre	ss	

TILLE		Address		
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country		
MANAGER	LISA TORTOLANI	64 ORANGE STREET		

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

LISA TORTOLANI 64 ORANGE STREET PROVIDENCE, RI 02906

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

Signed this 12 Day of November, 2020 at 10:28:19 AM 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>MICHAEL A. SHAFIR</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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