



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: **2021**

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.

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RI DEPT OF STATE
BUS SVCS DIV
2021 SEP 24 AM 11:19

1. Entity ID Number 001691302		2. Exact name of the Limited Liability Company Alyssa Yogiano LLC			
3. NAICS Code 812990		4. Brief description of the character of business conducted in Rhode Island Yoga Studo			
5. State of Formation Rhode Island					
6. Principal Office Address 78 Smith Ave.			City Greenville	State RI	Zip 02828
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Alyssa M. Schiano			Contact Title Member		
Street Address 99 Fortin Road			City Kingston	State RI	Zip 02881
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	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. 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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Alyssa M. Schiano				Date 9/22/21	
Signature of Authorized Person 					

FILED m

SEP 24 2021

BY Ch Olm
11/19

MAIL TO:
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