

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.

| 1. Entity ID Number 326172 | 2. Exact name of the Limited Liability Company Defying Gravity School of Dance, LLC | | | | | |
|--|--|--------------------|---|--------------------|------------------------|--|
| 3. NAICS Code 611610 | Brief description of the character of business conducted in Rhode Island To operate a dance school and related activities. | | | | | |
| 5. State of Formation RI | | | | | | |
| 6. Principal Office Address 816 Middle Road, Unit 4 | | | City East Greenwich | State RI | Zip 02818 | |
| 7. Mailing Address of Limited Lia | ability Compa | any and Name o | r Title of Contact Person | | • | |
| Contact Name Nicole Bibby | | | Contact Title Member | | | |
| Street Address 816 Middle Road, Unit 4 | | | City East Greenwich | State RI | ^{Zip} 02818 | |
| 8. List ALL managers (names a | nd addresse | s) of the Limited | Liability Company, IF APPLICABLE | E - 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 | |
| | <u>. </u> | | ,l | Check the box to i | indicate an attachment | |
| 9. The Resident Agent informati | on currently | of record with the | e RI Department of State is accura | | | |
| Under penalty of perjury, I dec statements, and that all stater | | | examined this report, including a true and correct. | any accompanyin | g schedules and | |
| Name of Authorized Person | | | | Date | Date | |
| Nicole Bibby | | | | 9/22/21 | | |
| Signature of Authorized Person | 7. Bi | bby | | | | |

MAIL TO:

Division of Business Services

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

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