	State of Rhode Island Fee: \$50.	.00
	Office of the Secretary of State	
	Division Of Business Services	
	148 W. River Street	_
	Providence RI 02904-2615	_
1636	(401) 222-3040	_
Limited Liability Annual Report Filing Period: Febr		
refusing to file its a	n R.I.G.L. 7-16-66(d), each limited liability company failing or annual report within thirty (30) days after the time prescribed by 66(b&c)) is subject to a penalty fee of \$25.00.	
ANNUAL REPORT	T YEAR - ENTER THE <u>CURRENT</u> FILING YEAR 2023 : <u>2023</u>	
1. ID No. 0016	<u>664074</u>	
2. Exact Name of	f the Limited Liability Company <u>BetaXAnalytics, LLC</u>	
3. State of Forma	ation	
State: <u>RI</u>		_
	ARTICLE III	
-	NAICS Code that best describes the primary business conducted by the entity. of codes <u>here.</u> More information on <u>NAICS</u> can be found online.	
<u>541618</u>		
4. Brief Description	on of the Character of the Business Which is Actually Conducted in Rhode	
USING ANALY	TICS TO HELP CLIENTS MAKE DATA-DRIVEN DECISIONS.	
5. Principal Offic	e Address	
No. and Street:	<u>125 CINDYANN DRIVE</u>	
City or Town:	EAST GREENWICHState: RIZip: 02818Country: USA	
6. Mailing Addres	ss of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: S	SHANNON SHALLCROSS Contact Title: BETAXANALYTICS	
No. and Street:	5775 POST ROAD	
	SUITE 2103	
City or Town:	EAST GREENWICH State: RI Zip: 02818 Country: USA	
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11		

JOEL K. GOLOSKIE, ESQ. PANNONE LOPES DEVEREAUX & OGARA LLC 1301 ATWOOD AVENUE SUITE 215N JOHNSTON , RI 02919

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

Signed this 1 Day of May, 2023 at 5:33:30 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>SHANNON SHALLCROSS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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