|   |  | e of Rhode Isla  |                   | Fee: \$50.00        |
|---|--|------------------|-------------------|---------------------|
| Office of the Secretary of State<br>Division Of Business Services   |  |                  |                   |                     |
| 148 W. River Street   |  |                  |                   |                     |
| Providence RI 02904-2615  |  |                  |                   |                     |
| <b>1636</b> (401) 222-3040  |  |                  |                   |                     |
| Limited Liability<br>Annual Report<br>Filing Period: Febr   |  |                  |                   |                     |
| In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or<br>refusing to file its annual report within thirty (30) days after the time prescribed by<br>law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00. |  |                  |                   |                     |
| ANNUAL REPORT YEAR - ENTER THE CURRENT FILING YEAR <b>2023</b> : 2023   |  |                  |                   |                     |
| <b>1. ID No.</b> <u>001740160</u>   |  |                  |                   |                     |
| 2. Exact Name of the Limited Liability Company Hungry Hearts Homeschool LLC   |  |                  |                   |                     |
| 3. State of Formation   |  |                  |                   |                     |
| State: <u>RI</u>  |  |                  |                   |                     |
| NAICS CODE  |  |                  |                   |                     |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.  |  |                  |                   |                     |
| <u>624410</u>   |  |                  |                   |                     |
| 4. Brief Description  | on of the Character of the I             | Business Which i | s Actually Conc   | lucted in Rhode     |
| HOMESCHOOL DURING SUMMER 2022   |  |                  |                   |                     |
| 5. Principal Offic  | e Address                                |                  |                   |                     |
| No. and Street:   | <u>6 THAYER STREET</u>                   |                  |                   |                     |
| City or Town:   | BRISTOL                                  | State: <u>RI</u> | Zip: <u>02809</u> | Country: <u>USA</u> |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:  |  |                  |                   |                     |
| Contact Name: <u>AMANDA ANDREWS</u> Contact Title: <u>OWNER, PRESIDENT</u>  |  |                  |                   |                     |
| No. and Street:   | <u>6 THAYER ST</u>                       |                  |                   |                     |
| City or Town:   | <u>239 CRANSTON ST</u><br><u>BRISTOL</u> | State: <u>RI</u> | Zip: <u>02809</u> | Country: <u>USA</u> |
| 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11   |  |                  |                   |                     |

AMANDA ANDREWS 6 THAYER STREET BRISTOL , RI 02809

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

**Signed this 13 Day of July, 2023 at 11:28:12 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>AMANDA ANDREWS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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