State of Rhode Island Fee: \$2 Office of the Secretary of State Division Of Business Services 148 W. River Street Providence RI 02904-2615 Providence RI 02904-2615 (401) 222-3040 Limited Liability Company Annual Report Filing Period: February 1 - May 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by 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 YEAR 2024: 2024 1. ID No. 001744205 2. Exact Name of the Limited Liability Company Intelvio, LLC 3. State of Formation State: UT NAICS CODE Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 611519 State	0.00
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611519	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
INSTRUCTIONAL AND TRAINING BUSINESS	
5. Principal Office Address	
No. and Street: <u>1971 WEST 700 NORTH</u> SUITE 102	
City or Town:LINDONState: UTZip: 84042Country: USA	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: <u>MONICA SANBORN</u> Contact Title: <u>SECRETARY</u> No. and Street: <u>1971 WEST 700 NORTH</u> <u>SUITE 102</u>	
City or Town: LINDON State: UT Zip: 84042 Country: USA	

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

REGISTERED AGENT SOLUTIONS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 22 Day of April, 2024 at 3:55:00 PM 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 MONICA SANBORN

Signature of Authorized Person

Form No. 632 Revised 09/07

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