




**State of Rhode Island
Department of State - Business Services Division**

Annual Report for the year: 2025
Limited Liability Company

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED
APR 21 2025
BY 200018645

| | | | |
|--|--|---|-------------------------------|
| 1. Entity ID Number 0001684160 | | 2. Exact name of the Limited Liability Company APPDYNAMICS LLC | |
| 3. NAICS Code 518210 | | 4. Brief description of the character of business conducted in Rhode Island SOFTWARE | |
| 5. State of Formation DELAWARE | | | |
| 6. Principal Office Address 500 TERRY A. FRANCOIS BLVD. | | City SAN FRANCISCO | State CA |
| | | Zip 94158 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name TRISHA MOK | | Contact Title TAX MANAGER | |
| Street Address 170 W. TASMAN DR. | | City SAN JOSE | State CA |
| | | Zip 95134 | |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | |
| 9. <i>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.</i> | | | |
| Name of Authorized Person EVAN SLOVES | | | Date April 12, 2025 |
| Signature of Authorized Person | | Signed by:  | |

6526C291033E4C6..

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov