RI SOS Filing Number: 202573434390 Date: 5/21/2025 4:00:00 PM

State of Rhode Isla  Department of S	nd State - Business Services Division		25 1 721
Annual Report for the year:	2025		5
Limited Liability Company  → Filing period: February 1  → Filing Fee: \$50.00	- May 1 I fee if form is not filed by May 31.		1000
1. Entity ID Number	2. Exact name of the Limited Liability Company	<del></del>	٦
001680035	The Barre & Yoga Experience LLC	•	ı
3. NAICS Code 713049	Brief description of the character of business conducted in Rhode Island to provide fitness & yoga activities		7
5. State of Formation			

City

8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.
9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

statements, and that all statements contained herein are true and correct.

**Smithfield** 

Contact Title

Warren

Member

State

RΙ

State RI

Date

Zip

02917

<sup>Zip</sup> 02917

**FILED** 

MAY 2 1 2025

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

6. Principal Office Address

Name of Authorized Person

Signature of Authorized Person

Angela Vieira

Angela Vieira

24 Kinnicutt Ave

259 Putnam Pike

Contact Name

Street Address

BY 345