

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000011599

Entity Name: IMAGINE LEARNING LLC

Current Principal Place of Business:

8860 E. CHAPARRAL RD., STE. 100
SCOTTSDALE, AZ 85250

Current Mailing Address:

8860 E. CHAPARRAL RD., STE. 100
SCOTTSDALE, AZ 85250 US

FEI Number: 45-1565841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER AND CHAIRMAN
Name GRAYER, JONATHAN N.
Address 2187 ATLANTIC STREET
 FIFTH FLOOR
City-State-Zip: STAMFORD CT 06902

Title MGR
Name MONDRE, GREG
Address 2187 ATLANTIC STREET
 FIFTH FLOOR
City-State-Zip: STAMFORD CT 06902

Title MANAGER AND VICE CHAIRMAN
Name KLABER, ADAM J.
Address 2187 ATLANTIC STREET
 FIFTH FLOOR
City-State-Zip: STAMFORD CT 06902

Title MGR
Name DURHAM, JONATHAN
Address 2187 ATLANTIC STREET
 FIFTH FLOOR
City-State-Zip: STAMFORD CT 06902

Title CFO, EXECUTIVE VICE PRESIDENT
 AND TREASURER
Name ALDERSLADE, DAVID A.
Address 8860 E. CHAPARRAL RD., STE. 100
City-State-Zip: SCOTTSDALE AZ 85250

Title MANAGER
Name GOLDBERG, LAURENCE
Address 2187 ATLANTIC STREET
 FIFTH FLOOR
City-State-Zip: STAMFORD CT 06902

Title MANAGER
Name ARMSTRONG, DAVID
Address 2187 ATLANTIC STREET
 FIFTH FLOOR
City-State-Zip: STAMFORD CT 06902

Title VICE CHAIRMAN AND CHIEF
 STRATEGY OFFICER
Name FACTOR, SARI G.
Address 8860 E. CHAPARRAL RD., STE. 100
City-State-Zip: SCOTTSDALE AZ 85250

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID S. ALDERSLADE

CFO, EVP & TREASURER 04/06/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP, CONTROLLER AND SECRETARY
Name STANIEC, KELLY
Address 8860 E. CHAPARRAL RD., STE. 100
City-State-Zip: SCOTTSDALE AZ 85250

Title SENIOR VICE PRESIDENT, GENERAL
COUNSEL, ASSISTANT SECRETARY
Name GRAHAM, CHRISTOPHER M.
Address 2187 ATLANTIC STREET
FIFTH FLOOR
City-State-Zip: STAMFORD CT 06902