	State of Rhode Island and Providence PlantationsFee: \$50.0Office of the Secretary of State
HOPE	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040
_imited Liability C	ompany
Annual Report	shipany
Filing Period: Septemb	r 1 - November 1
o file its annual report	G.L. 7-16-66(d), each limited liability company failing or refusing vithin thirty (30) days after the time prescribed by law (R.I.G.L. 7- a penalty fee of \$25.00.
ANNUAL REPORT YEAR: 2017	
1. ID No. <u>000526</u>	718
2. Exact Name of th	Limited Liability Company Elmwood Tax Services, LLC
3. State of Formatio	1
State: <u>RI</u>	
	ARTICLE III
Lising the following NA	ICS codes, please select the code that hest describes your business
	ICS codes, please select the code that best describes your business.
Using the following NA	ICS codes, please select the code that best describes your business.
NAICS Code	
NAICS Code	<u>6</u> <u>81</u>
NAICS Code 4. Brief Description of	<u>6</u> <u>81</u>
NAICS Code 4. Brief Description of	6 81 f the Character of the Business Which is Actually Conducted in Rhode Island S NOTARY PUBLIC
NAICS Code 4. Brief Description of <u>TAX FILING,COPY</u> 5. Principal Office Ac	6       81         f the Character of the Business Which is Actually Conducted in Rhode Island         S NOTARY PUBLIC         dress
NAICS Code         4. Brief Description of         TAX FILING,COPY         5. Principal Office Action         No. and Street:       6	6 81 f the Character of the Business Which is Actually Conducted in Rhode Island S NOTARY PUBLIC
NAICS Code         4. Brief Description of         TAX FILING,COPY         5. Principal Office Action         No. and Street:       6         City or Town:       P	6       81         f the Character of the Business Which is Actually Conducted in Rhode Island         S NOTARY PUBLIC         dress         6 ELMWOOD AVENUE         ROVIDENCE         State: RI         Zip: 02907         Country: USA
NAICS Code         4. Brief Description of         TAX FILING,COPY         5. Principal Office Action         No. and Street:       6         City or Town:       P         6. Mailing Address of	6       81         f the Character of the Business Which is Actually Conducted in Rhode Island         S NOTARY PUBLIC         dress         06       ELMWOOD AVENUE         ROVIDENCE       State: RI       Zip: 02907       Country: USA         Limited Liability Company and Name or Title of Contact Person:
NAICS Code         4. Brief Description of         TAX FILING,COPY         5. Principal Office Act         No. and Street:       6         City or Town:       P         6. Mailing Address of         Contact Name:       LUC	6       81         f the Character of the Business Which is Actually Conducted in Rhode Island         S NOTARY PUBLIC         dress         06       ELMWOOD AVENUE         ROVIDENCE       State: RI       Zip: 02907         Country: USA         Limited Liability Company and Name or Title of Contact Person:         A TAVAREZ Contact Title:
NAICS Code         4. Brief Description of         TAX FILING,COPY         5. Principal Office Action         No. and Street:       6         City or Town:       P         6. Mailing Address of         Contact Name:       LUC         No. and Street:       780	6       81         f the Character of the Business Which is Actually Conducted in Rhode Island         S NOTARY PUBLIC         dress         06       ELMWOOD AVENUE         ROVIDENCE       State: RI       Zip: 02907       Country: USA         Limited Liability Company and Name or Title of Contact Person:
NAICS Code         4. Brief Description of         TAX FILING,COPY         5. Principal Office Act         No. and Street:       6         City or Town:       P         6. Mailing Address of         Contact Name:       LUC         No. and Street:       780         City or Town:       CR	Image: State in the state
NAICS Code         4. Brief Description of         TAX FILING,COPY         5. Principal Office Act         No. and Street:       6         City or Town:       P         6. Mailing Address of         Contact Name:       LUC         No. and Street:       780         City or Town:       CR/         7. Name and Address	Image: State in the state

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

LUCIA TAVAREZ 606 ELMWOOD AVENUE PROVIDENCE, RI 02907

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

**Signed this 20 Day of January, 2017 at 10:58:40 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 JUAN CARLOS SANCHEZ Signature of Authorized Person

Form No. 632 Revised 09/07

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