RI SOS Filing Number: 201987486030 Date: 2/25/2019 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee. \$50.00

→ Penalty: Additional \$25 00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company ELMORE DESIGN COLLAWRATIVE, LIC				
3 NAICS Code	4. Bnef cescription of the character of business conducted in Rhode Island				
541320	A				
	LANDSCAPE ARCHITECTURE - PLANNING AND DESIGN				
5 State of Formation	of outbook Lanoscapes				
6. Pnncipal Office Address			City	State	Zip
615 MATHER	STREET	_	SUFFIELD	CT	06078
7. Mailing Address of Limited Lia	brity Company a	and Name or Title	of Contact Person		
Contact Name THOMAS 1. ELMORE			Contact Tile FOUNDER		
Street Address GIS MATHER STREET			City SUFFIELD	State	Zip 06078
8 List ALL managers (names ar			ility Company, IF APPLICABLE		MEMBERS
Wanager Name			Manager Name		
Street Addre			, Street Address		
City - State Zin			City	Stato	Zıp
Manager Name			Manager Name		
Stree: Address			Street Address		
City	State	Zıp	City	State	7 _{IP}
_	1	1		Check the box to	indicate an attachment
9 Resident Agent in Rhode Islan	nd. This informatio	n is currently of rec	ord with the Department of State	Changes require filii	ng Form 642
Under penalty of perjury, I dec statements, and that all staten				ny accompanyin	ng schedules and
Name of Authorized Person THOMAS J. ELMORE				Piss. 22, 2019	
Signature of Authorized Person	flumos		DOUMENT HERE	•	
	1	V	<u> </u>		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

FILED
FEB 2 5 2019 02

FORM 632 - Revised: 10/2017