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 COLLABORATIVE, LLC					
001685196	 		· · · · · · · · · · · · · · · · · · ·	•		
3 NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
541320	LANDSCAPE ARCHITECTURE - PLANNING AND DESIGN					
5 State of Formation	OF OUTBOOK LANDSCAPES					
6. Principal Office Address			City	State	Zıp	
615 MATHER	STRE	न	SUFFIELD	CT	06078	
7. Mailing Address of Limited Li	abrity Compar	ny and Name or	Title of Contact Person			
Contact Name THOMAS J. ELMORE			Contact Tile FOUNDER			
Street Address LIS MATHER STREET			City SUFFIELD	State	Zip 06078	
		••	Liability Company, IF APPLICABLE		MEMBERS	
Manager Name			Manager Name			
Street Addre			, Street Accress			
City - State Zin			City	State	Zip	
Manager Name	,		Manager Name	_	-	
Street Address			Stree: Address			
City	State	Zıp	City	State	7ip	
	1		<u>_</u>	Check the box to indicate an attachment		
9 Resident Agent in Rhode Isla	ind. This inform	ation is currently o	of record with the Department of State	Changes require fil	ing Form 642	
Under penalty of perjury, I destatements, and that all states			examined this report, including a true and correct.	ny accompanyi	ng schedules and	
Name of Authorized Person	. ELMO	ri		Fish. 22, 2019		
Signature of Authorized Person		1 «Ov) DOCUMENT HERE	•		
	1	0				

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