	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00	
Division Of Business Services				
	148 W. River Street Providence RI 02904-2615			
Hone	(401) 222-30			
HOPE		-		
Limited Liability Cor Annual Report	npany			
Filing Period: September	1 - November 1			
In accordance with RIGI	7-16-66(d) each limited liability com	any failing or refusing		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-				
16-66(b&c)) is subject to a	penalty fee of \$25.00.			
ANNUAL REPORT YEAR	:: <u>2019</u>			
1. ID No. <u>000962143</u>				
2. Exact Name of the Limited Liability Company <u>CURO ELMWOOD, LLC</u>				
3. State of Formation				
State: <u>DE</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.				
<u>531120</u>				
4. Brief Description of t	he Character of the Business Which	is Actually Conducted in	Rhode Island	
REAL ESTATE LEAS	NG			
5. Principal Office Addr	ess			
No. and Street: <u>51</u>	5 MADISON AVE.			
	ITE 30A	W = 100 00		
City or Town: <u>NE</u>	<u>EW YORK</u> State: <u>N</u>	<u>IY</u> Zip: <u>10022</u> Co	untry: <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact Title:				
	15 MADISON			
	<u>UITE 30A</u> EW YORK State: <u>NY</u>	Zip: <u>10010</u> Cour	ntry: <u>USA</u>	
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name	Address		
	First, Middle, Last, Suffix	Address, City or Town, State, 2	Zip Code, Country	

STEVEN COX

MANAGER

515 MADISON AVE., SUITE 30A

NEW YORK, NY 10022 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

REGISTERED AGENT SOLUTIONS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

Signed this 6 Day of August, 2019 at 3:48:42 PM 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 <u>STEVEN COX</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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