RI SOS Filing Number: 202102192980 Date: 9/28/2021 4:00:00 PM



R.I. DEPT. OF STATE BUS SVCS DIV

2021 SEP 28 A 58 43 1P

Annual Report for the year: 2021
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 127269	2. Exact name of the Limited Liability Company TAXPLUS, LLC					
3. NAICS Code 812990	Brief description of the character of business conducted in Rhode Island TAX SERVICES					
5. State of Formation RHODE ISLAND						
Principal Office Address RESERVOIR AVENUE			City CRANSTON	State RI	Zip 02910	
7. Mailing Address of Limited Lia	bility Compan	y and Name or Tit	e of Contact Person			
Contact Name ELVIS SENA			Contact Title MANAGER			
Street Address 861 RESERVOIR AVENUE			City CRANSTON	State RI	^{Zip} 02910	
8. List ALL managers (names a	nd addresses)	of the Limited Lial	bility Company, IF APPLICAB	LE - DO NOT LIST	MEMBERS	
Manager Name ELVIS SENA			Manager Name			
Street Address 861 RESERVOIR AVENUE			Street Address			
City CRANSTON	State RI	^{Zıp} 02910	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	1		· · · · · · · · · · · · · · · · · · ·	Check the box to	indicate an attachment	
9. The Resident Agent information	on currently of	record with the RI	Department of State is accur	rate. Changes requir	e filing Form 642.	
Under penalty of perjury, I dec statements, and that all stater	clare and affir	m that I have exa	mined this report, including			
Name of Authorized Person				Date	Date	
ELVIS M. SENA				07/03/2	07/03/2021	
Signature of Authorized Person)	1				

MAIL TO:

Division of Business Services

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

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

SEP 16 CILLS

FORM 632 - Revised: 08/2020