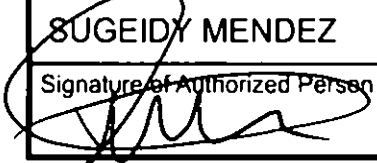


**State of Rhode Island
Department of State - Business Services Division**REC'D RIDGERS BSD
24 MAR 7 AM 9:43:53**STAMP****Annual Report for the year:** 2024
Limited Liability Company

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000793096		2. Exact name of the Limited Liability Company Advantax and Insurance LLC		
3. NAICS Code 524210		4. Brief description of the character of business conducted in Rhode Island INSURANCE AND TAXES		
5. State of Formation RI				
6. Principal Office Address 400 WARWICK AVE UNIT 11		City WARWICK	State RI	Zip 02888
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name SUGEIDY MENDEZ		Contact Title		
Street Address 400 WARWICK AVE UNIT 11		City WARWICK	State RI	Zip 02888
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. <i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>				
Name of Authorized Person SUGEIDY MENDEZ			Date 03/07/2024	
Signature of Authorized Person 				

FILED**MAR 07 2024****9:45 BY ML FG5QV****MAIL TO:****Division of Business Services**

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

Phone: (401) 222-3040

Website: www.sos.ri.gov