

Department of State - Business Services Division

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.

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BY

127269	2. Exact name of the Limited Liability Company TAXPLUS, LLC			
3. NAICS Code 312990	Brief description of the character of business conducted in Rhode Island TAX SERVICES			
State of Formation RHODE ISLAND				
6. Principal Office Address 861 RESERVOIR AVENUE		City CRANSTON	State RI	Zip 02910
7. Mailing Address of Limite	ed Liability Company and Name of	or Title of Contact Person		
Contact Name ELVIS M. SENA		Contact Title MANAGER		
Street Address 861 RESERVOIR AVENUE		City CRANSTON	State RI	^{Zip} 02910
3. The Resident Agent infor	mation currently of record with the	ne RI Department of State is accura	te. Changes requir	e filing Form 642.
	I declare and affirm that I have tatements contained herein are	examined this report, including e true and correct.	any accompanyin	g schedules and
Name of Authorized Person			Date	
EL VIS M. SENA			12/07/2023	

MAIL TO:

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Division of Business Services

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