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State of Rhode Island
Department of State - Business Services Division**Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-49, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:		
TAXACT, LLC		
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes ☐ No ☒		
The name, if different, under which it proposes to register and transact business in Rhode Island is:		
2. The LLC is organized under the laws of: TEXAS		
3. The date of its organization is: 2/18/2025		
And the period of its duration is: CHECK ONE BOX ONLY		
☒ Perpetual (on-going)		
☐ Date certain for dissolution _____		
4. The name and address of the resident agent/office in Rhode Island is:		
Agent Name CORPORATION SERVICE COMPANY		
Street Address (NOT a P.O. Box) 222 JEFFERSON BOULEVARD, STE 200		
City/Town WARWICK	State RHODE ISLAND	Zip Code 02888
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
SOFTWARE PUBLISHING		
Check the box to indicate an attachment ☐		

MAIL TO:Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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BY SDMD

6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.		
7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is: 3200 OLYMPUS BLVD, STE 150, COPPEL, TX 75019		
8. The mailing address for the limited liability company is: 3200 OLYMPUS BLVD, STE 150, COPPEL, TX 75019		
9. Management of the Limited Liability Company: CHECK ONE BOX ONLY		
☒ Members (Owners) OR ☐ Manager(s). Complete the chart below. DO NOT complete the chart below.		
	MANAGER(S) NAME	ADDRESS
Check the box to indicate an attachment ☐		
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.		
11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY		
☒ Date received (Upon filing) ☐ Later effective date (Date must be no more than 90 days from the date of filing) _____		
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.		
Type or Print Name of LLC TAXACT, LLC	Date 5/27/2025	
Signature of Authorized Person <i>Curtis Tripoli</i>		

RI DOS MADE EDITS PER FILER

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

Corporations Section
P.O. Box 13697
Austin, Texas 78711-3697



Jane Nelson
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Conversion for TaxAct, LLC (file number 805939119), a Domestic Limited Liability Company (LLC), was filed in this office on March 05, 2025.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate CORPORATION SERVICE COMPANY DBA CSC - LAWYERS INCORPORATING SERVICE COMPANY as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

211 E. 7TH STREET, SUITE 620

AUSTIN, TX - 78701 3218 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 15, 2025.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson
Secretary of State



State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

June 18, 2025 10:36 AM

A handwritten signature in black ink, reading "Gregg M. Amore".

Gregg M. Amore
Secretary of State

