

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037668

Entity Name: CUSTOM ACCOUNTING SOLUTIONS, LLC

Current Principal Place of Business:

12 POINTE CIRCLE
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

PO BOX 1481
SANTA ROSA BEACH, FL 32459

FEI Number: 84-1464547

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOTT, ELAINE
12 POINTE CIRCLE
SANTA ROSA BEACH, FL 32459 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name MOTT, ELAINE
Address 12 POINTE CIRCLE
City-State-Zip: SANTA ROSA BEACH FL 32459

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELAINE MOTT

MGRM

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date