## 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. 01/08/2014

SIGNATURE: DOREEN SCHMID

Electronic Signature of Signing Authorized Person(s) Detail

110 E BROWARD BLVD #1700 FT. LAUDERDALE. FL 33301

Entity Name: ADVANCED TAX SOLUTIONS, LLC

# FEI Number: 26-4025972

DOCUMENT# L05000020913

110 E BROWARD BLVD #1700 FT. LAUDERDALE. FL 33301

**Current Mailing Address:** 

**Current Principal Place of Business:** 

### Name and Address of Current Registered Agent:

SCHMID, DOREEN 520 SW 12TH COURT FT. LAUDERDALE, FL 33315 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

#### Authorized Person(s) Detail :

Title	MGRM	Title	MGR
Name	SCHMID, DOREEN	Name	SCHMID, FRED
Address	520 SW 12TH COURT	Address	520 SW 12TH COURT
City-State-Zip:	FT. LAUDERDALE FL 33315	City-State-Zip:	FT. LAUDERDALE FL 33315

**OWNER/MEMBER** 

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 08, 2014 Secretary of State CC0235254152

Certificate of Status Desired: No

Date

Date