

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000145450

**Entity Name:** COHEN BOOKKEEPING SOLUTIONS, LLC

**Current Principal Place of Business:**

19412 NW 23RD CT.  
MIAMI GARDENS, FL 33056

**Current Mailing Address:**

19412 NW 23RD CT.  
MIAMI GARDENS, FL 33056

**FEI Number:** 47-2539814

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COHEN, COLLEEN T  
19412 NW 23RD CT.  
MIAMI GARDENS, FL 33056 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            AUTHORIZED MEMBER  
Name            COHEN, COLLEEN T  
Address        19412 NW 23RD CT.  
City-State-Zip: MIAMI GARDENS FL 33056

*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:** COLLEEN COHEN

04/29/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date