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: TRACIE MOELLER

Electronic Signature of Signing Authorized Person(s) Detail

9476 SADDLEBROOK DR BOCA RATON, FL 33496

Current Principal Place of Business:

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: ALL AROUND TOWN BOOKKEEPING SERVICES, LLC

Current Mailing Address:

DOCUMENT# L16000196313

9476 SADDLEBROOK DR BOCA RATON, FL 33496

FEI Number: 81-4255206

Name and Address of Current Registered Agent:

MOELLER, TRACIE A 9476 SADDLEBROOK DR BOCA RATON, FL 33496 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:

Authorized Pers

Title	AMBR	Title	MANAGER
Name	MOELLER, TRACIE A	Name	CATANIA, JO-ANN M
Address	9476 SADDLEBROOK DR	Address	204 BRITTANY E
City-State-Zip:	BOCA RATON FL 33496	City-State-Zip:	DELRAY BEACH FL 33446

Electronic Signature of Registered Agent		
son(s) Detail :		
BR	Title	MANAGER

04/20/2017 AMBR

Certificate of Status Desired: No

FILED Apr 20, 2017 Secretary of State CC8218258640

Date

Date