

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000280811

**Entity Name:** GCON TAX SOLUTIONS, LLC

**Current Principal Place of Business:**

1216 EAST ATLANTIC BLVD  
STE 1  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

1216 EAST ATLANTIC BLVD  
STE 1  
POMPANO BEACH, FL 33060 US

**FEI Number:** 83-2915269

**Certificate of Status Desired:** No

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

LOUISMA, WILLIAM  
2393 SOUTH CONGRESS AVE  
200  
WEST PALM BEACH, FL 33406 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 MGR  
Name LOUISMA, WILLIAM  
Address 2393 SOUTH CONGRESS AVE STE  
134  
City-State-Zip: WEST PALM BEACH US 33406

*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:** WILLIAM LOUISMA

**MANAGER**

**02/13/2019**

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

\_\_\_\_\_  
Date