2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046819

FILED Apr 30, 2009 Secretary of State

Entity Name: BOTTOM LINE BOOKKEEPING & TAX SERVICE, LLC

New Principal Place of Business: Current Principal Place of Business: 111 W. MAIN STREET INVERNESS, FL 34450 **Current Mailing Address: New Mailing Address:** 111 W. MAIN STREET INVERNESS, FL 34450 FEI Number: 20-4931514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COHEN, R.A 111 W. MAIN STREET INVERNESS, FL 34450 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete Name: COHEN, R.A. Name: Address: 111 W. MAIN STREET Address: City-St-Zip: INVERNESS, FL 34450 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: COHEN, DIANE Name: Address: 111 W. MAIN STREET Address: City-St-Zip: INVERNESS, FL 34450 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: R A COHEN MBR 04/30/2009