

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000123092

Entity Name: BOSSO & MITCHELL, LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

1615 FORUM PLACE
SUITE 500
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

1615 FORUM PLACE
SUITE 500
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 20-8120842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WP MITCHELL, CPA, PA
216 ARLINGTON ROAD
WEST PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: LUISA K. BOSSO, C.P.A., P.A.
Address: 1615 FORUM PLACE, SUITE 500
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGRM () Delete
Name: WP MITCHELL, C.P.A., P.A.
Address: 216 ARLINGTON ROAD
City-St-Zip: WEST PALM BEACH, FL 33405 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: WILLIAM P. MITCHELL

MGRM

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date