

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049861

Entity Name: BACK TAX SOLUTIONS, LLC

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

6020 SHORE BLVD. SOUTH
707
GULFPORT, FL 33707 US

New Principal Place of Business:

5819 26TH AVE SOUTH
GULFPORT, FL 33707 US

Current Mailing Address:

PO BOX 5165
GULFPORT, FL 33737 US

New Mailing Address:

FEI Number: 26-2643584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBOWITZ, DENA
6020 SHORE BLVD SOUTH
707
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

LEBOWITZ, DENA
5819 26TH AVE SOUTH
GULFPORT, FL 33707 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: DENA LEBOWITZ

03/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEBOWITZ, DENA J EA
Address: 6020 SHORE BLVD SOUTH #707
City-St-Zip: GULFPORT, FL 33707 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEBOWITZ, DENA J EA
Address: 5819 26TH AVE SOUTH
City-St-Zip: GULFPORT, FL 33707 US

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: DENA LEBOWITZ

MS.

03/23/2009

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