

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000058529

FILED
Sep 30, 2009
Secretary of State

Entity Name: TAX, ACCOUNTING & PAYROLL SERVICES, LLC

Current Principal Place of Business:

809 WALKERBILT ROAD
5
NAPLES, FL 34110 US

New Principal Place of Business:

809 WALKERBILT ROAD
6
NAPLES, FL 34110 US

Current Mailing Address:

809 WALKERBILT ROAD
5
NAPLES, FL 34110 US

New Mailing Address:

809 WALKERBILT ROAD
6
NAPLES, FL 34110 US

FEI Number: 26-2795493 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TAX, ACCOUNTING & FINANCIAL ASSOCIATES
809 WALKERBILT ROAD
5
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

TAX & ACCOUNTING OF SWFL, LLC
809 WALKERBILT ROAD
6
NAPLES, FL 34110 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: BENJAMIN COTTRELL, JR

09/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COTTRELL, BENJAMIN J JR.
Address: 809 WALKERBILT ROAD, STE 5
City-St-Zip: NAPLES, FL 34110 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COTTRELL, BENJAMIN J JR.
Address: 809 WALKERBILT ROAD, STE 6
City-St-Zip: NAPLES, FL 34110 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: BENJAMIN COTTRELL, JR

PRES

09/30/2009

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