

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000100476

Entity Name: MORE MONEY TAX LLC

FILED
Sep 30, 2009
Secretary of State

Current Principal Place of Business:

3788 SW 16TH STREET
FT LAUDERDALE, FL 33312 US

Current Mailing Address:

3788 SW 16TH STREET
FT LAUDERDALE, FL 33312 US

New Principal Place of Business:

5460 N STATE ROAD 7
SUITE 220A
FT LAUDERDALE, FL 33319 US

New Mailing Address:

5460 N STATE ROAD 7
SUITE 220A
FT LAUDERDALE, FL 33319 US

FEI Number: 26-3776048 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:

WATSON, WAYNE O
1801 N FLAGLER DR
SUITE 401
WEST PALM BEACH, FL 33407 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: WAYNE WATSON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WATSON, WAYNE O
Address: 1801 N FLAGLER DR
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: MGRM () Delete
Name: BLYTHE, PAUL
Address: 3788 SW 16TH STREET
City-St-Zip: FT LAUDERDALE, FL 33312 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: WAYNE WATSON

MR

09/30/2009

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