

L17 000 222327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

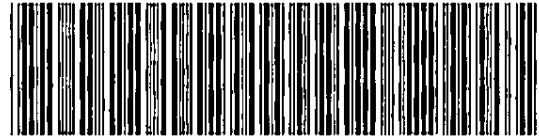
(Business Entity Name)

(Document Number)

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6/18/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TAX RELIEF SPECIALISTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSEPH SORTOR

Name of Person

TAX RELIEF SPECIALISTS LLC

Firm/Company

1044 E BRANDON BLVD

Address

BRANDON, FL 33511

City/State and Zip Code

joe@97tax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH SORTOR

813 597-5493
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated April 20, 2021

Signature of a member or authorized representative of a member

JOSEPH SORTOR

Typed or printed name of signee