

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000103456

**Entity Name:** SPECIALIZED TAX CONSULTANTS, LLC

**Current Principal Place of Business:**

315 A STREET  
BOSTON, MA 02210

**Current Mailing Address:**

315 A STREET  
909  
BOSTON, MA 02210 US

**FEI Number:** 33-1185549

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEE, JONATHAN  
315 A STREET  
909  
BOSTON, FL 02210 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGRM
Name	LEE, JONATHAN
Address	315 A STREET 909
City-State-Zip:	BOSTON MA 02210

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JONATHAN LEE

MGR

04/30/2015

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date