

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000496

Entity Name: RECOVERY SOLUTIONS, LLC

Current Principal Place of Business:

109 E 17TH STREET
80
CHEYENNE, WY 82001

Current Mailing Address:

PO BOX 468
ARIPEKA, FL 34679

FEI Number: 20-1042298

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE HOGAN LAW FIRM, LLC
20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601 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 MGR
Name GRUBBS, JOHN G
Address PO BOX 468
City-State-Zip: ARIPEKA FL 34679

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: JOHN G GRUBBS

MGR

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date