

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000015775

**Entity Name:** FREEDOM TAX SOLUTIONS LLC

**Current Principal Place of Business:**

4226 BURNING TREE LN S  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

4226 BURNING TREE LN S  
JACKSONVILLE, FL 32223

**FEI Number:** 87-3628752

**Certificate of Status Desired:** Yes

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

PARNELL, KENDRICK  
4226 BURNING TREE LN S  
JACKSONVILLE, FL 32223 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 PARNELL, KENDRICK  
Address 4226 BURNING TREE LN S  
City-State-Zip: JACKSONVILLE FL 32223

Title MBR  
Name PARNELL, KENDRICK  
Address 4226 BURNING TREE LN S  
City-State-Zip: JACKSONVILLE FL 32223

Title MGR  
Name GAWLIK, LISA  
Address 4226 BURNING TREE LN S  
City-State-Zip: JACKSONVILLE FL 32223

Title MBR  
Name GAWLIK, LISA  
Address 4226 BURNING TREE LN S  
City-State-Zip: JACKSONVILLE FL 32223

Title MGR  
Name GAWLIK, WILLIAM  
Address 4226 BURNING TREE LN S  
City-State-Zip: JACKSONVILLE FL 32223

Title MBR  
Name GAWLIK, WILLIAM  
Address 4226 BURNING TREE LN S  
City-State-Zip: JACKSONVILLE FL 32223

*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:** KENDRICK PARNELL

**CEO**

**04/29/2022**

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

\_\_\_\_\_  
Date