

Form **LLC-50.1**

Illinois  
Limited Liability Company Act  
**Annual Report**

FILE # 12546688

Due prior to: 12/01/2024

**Secretary of State**  
Department of Business Services  
Limited Liability Division  
501 S. Second St., Rm. 351  
Springfield, IL 62756  
217-524-8008  
www.ilsos.gov

**Filing Fee:** 75.00  
**Series Fee, if required:**  
**Penalty:** 0.00  
**Total:** 75.00

**FILED**

**October 21, 2024**

**Alexi Giannoulis**  
**Secretary of State**

1. Limited Liability Company Name: TAX RECOVERY LLC

Registered Agent: LARECIA NICHOLE TUCKER

861 BIRCH LN

CHICAGO HEIGHTS, IL 60411-2007

2. State or Country of Organization: IL Date Organized in or Admitted to Illinois: 12/06/2022

3. Address of Principal Place of Business:  
621 CHICAGO RD CHICAGO HEIGHTS, IL 60411

4. Name and business address of all managers and any member having the authority of manager:  
TUCKER, LARECIA NICHOLE  
621 CHICAGO RD CHICAGO HEIGHTS, IL 60411

5. Entity managers affirm their current existence.

6. Changes to the registered agent and/or registered office must be submitted on Form LLC-1.36/1.37.

7. I affirm, under penalties of perjury, having authority to sign thereto, that this Annual Report is to the best of my knowledge and belief, true, correct and complete.

Dated: October 21, 2024  
Month/Day Year

TUCKER, LARECIA NICHOLE  
Name

MANAGER  
Title

If applicant is a company or other entity, state Name of Company