2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 12, 2012
Secretary of State

DOCUMENT# L10000044781

Entity Name: BUONICONTI MH MEMBER, LLC

Current Principal Place of Business:

10 EDGEWATER DRIVE, SUITE 9H
CORAL GABLES, FL 33133

New Principal Place of Business:

Current Mailing Address:

10 EDGEWATER DRIVE, SUITE 9H
CORAL GABLES, FL 33133

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUONICONTI, NICHOLAS A
10 EDGEWATER DRIVE, SUITE 9H
CORAL GABLES, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BUONICONTI, NICHOLAS A
Address: 10 EDGEWATER DRIVE 9H
City-St-Zip: CORAL GABLES, FL 33133

I hereby certify that the information indicated on this 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 608, Florida Statues.

SIGNATURE: NICHOLAS A. BUONICONTI MGR 09/12/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date