## FILED May 25, 2007 8:00 am Secretary of State 05-25-2007 90199 033 \*\*\*\*50.00

2007 LIMITED LIABILITY COMPAN ANNUAL REPORT										
DOCUMENT # MOODOODOO										

E. Name and Address of Current Registered Agent  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. The Address of New Registered Agent  8. The Address of New Registered Agent  8. The Address of New Registered Agent  9. City PL  9. City PL  9. City PL  9. ADDITIONS/CHANGES  9. City S.1.PP  9. ADDITIONS/CHANGES  9. City S.1	1. Entity Nam	MIEIN I # M99000000 CONNECT, L.L.C.	000					03 23 2	.007 2013		70.00
Sulfe, April #, etc.	2997-LBJ FR	EEWAY, SUITE 225	6455 EAST JOHNS CROSSING, SUITE 285			5					
#225	2. Principal P	lace of Business - No P.O. Box #			<del>B5 (</del>	recupy					
Dallas, TX	Suite, Apt.	#, etc.					4192007	Chg-LLC	CR	2E083 (12/06)	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. 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. I am familiar with, and acc the obligations of registered agent.  8. 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. I am familiar with, and acc the obligations of registered agent.  8. 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. I am familiar with, and acc the obligations of registered agent.  9. Make check payable to Florida Department of State  Filling Foe is \$50.00  Port Registered Agent agrature required aftern remaining)  Post Registered Agent agrature required aftern remaining)  Post Registered Agent agrature required aftern remaining part required af	City & State	9				4.					oplied For ot Applicable
Name Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  8. 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. I am familiar with, and acceptable or registered agent, or both, in the State of Florida. I am familiar with, and acceptable or registered agent, or both, in the State of Florida. I am familiar with, and acceptable or registered agent, or both, in the State of Florida. I am familiar with, and acceptable or registered agent, or both, in the State of Florida. I am familiar with, and acceptable or registered agent, or both, in the State of Florida. I am familiar with, and acceptable or registered agent, or both, in the State of Florida. I am familiar with, and acceptable to Florida Department of State  Filling Foe is \$50,000  By Make check payable to Florida Department of State  By Managing MeMBERS/MANAGERS  IIILE  MGR  DORWART, DAVID B  SIREELADORSS  CITY-S1-IIP  MGR  MORGENSTERN, WILLIAM E  SIREELADORSS  SIRE	Zip				L 5. Certificate of Status Desired						
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City		6. Name and Address of Current R	tegistered Agent			7.	Name and	Address of N	ew Register	red Agent	
E. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and acc the obligations of registered agent.  SIGNATURE    Signature, hyeld or pursue of registered agent and life if applicative. (NOTE Registered agent	515 E. PAF	RK AVE.				ddress (P.O.	(P.O. Box Number is Not Acceptable)				
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am lamiliar with, and acc the obligations of registered agent.  SIGNATURE    Symboliar, hydrod or printed nume of registered agent and life if applicable.   (NOTE Requiremed Agent agriculture required when remaistrig)   OATE		0230			City					= Zin Cod	
Part	the obligati	ions of registered agent.						oth, in the State	of Florida. I	am familiar with,	and accept
TITLE NAME DORWART, DAVID B SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME NAME NAME NAME NORGENSTERN, WILLIAM E SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME NAME SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR NAME SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR NAME SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR NAME SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR Christopher A. Korst SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR Christopher A. Korst SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR Christopher A. Korst SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR Christopher A. Korst SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR NAME SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR NAME SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR Dawn M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR Dawn M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME NAME NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DAWN M. Wolverton SIRRET ADDRESS CITY-ST-ZIP DALLAS TX 75234  TITLE NAME DALLA											e
NAME STREET ADDRESS CITY- ST-ZIP  DALLAS, TX 75234  TITLE MGR MORGENSTERN, WILLIAM E STREET ADDRESS CITY- ST-ZIP  MAME MORGENSTERN, WILLIAM E STREET ADDRESS CITY- ST-ZIP  DALLAS, TX 75234  TITLE MGR MORGENSTERN, WILLIAM E STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  TITLE MGR FLEMING, ROBERT B JR STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  TITLE NAME STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  TITLE NAME STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  Delete TITLE NAME STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  Delete TITLE NAME STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  TITLE NAME STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  TITLE NAME STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  TITLE NAME STREET ADDRESS CITY- ST-ZIP DALLAS, TX 75234  TITLE DALLAS, TX	9.	MANAGING MEMBER	RS/MANAGERS	10.				ADDITIO	ONS/CHAN	GES	
NAME SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE MGR NAME SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME NAME SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME SIREET ADDRESS CITY-ST-ZIP DEIELE DEIELE DEIELE DILLE NAME SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN MGR DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME DAWN M. Wolverton SIREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME	NAME STREET ADDRESS	DORWART, DAVID B 2997-LBJ FREEWAY, SUITE 225	☐ Delete	NAMI STRE	ET ADDRESS					☐ Change	Addition
NAME FLEMING, ROBERT B JR STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75234  TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME NAME NAME NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME NAME NAME Dawn M. Wolverton STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME NAME Dawn M. Wolverton STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME Dawn M. Wolverton STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME Dawn M. Wolverton STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME Dawn M. Wolverton STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME Dawn M. Wolverton Change Add	NAME STREET ADDRESS	MORGENSTERN, WILLIAM E 2997-LBJ FREEWAY, SUITE 225	☑ Delete	NAM: STRE	ET ADDRESS	Robert D 2997 LB	ert D. Davis LBJ Freeway #225			☐ Change	
TITLE NAME NAME STREET ADDRESS CITY-S1-ZIP Delete D	name Street address	FLEMING, ROBERT B JR 2997 LBJ FREEWAY, STE 225	□ Delete	NAMI STRE	et <b>adoress</b>	Christoph 2997 LBJ	J Freewa	y #225		☐ Change	☑ Addition
NAME         Dawn M. Wolverton           STREET ADDRESS         2997 LBJ Freeway #225           CITY-ST-ZIP         CITY-ST-ZIP           Delete         TITLE           NAME         Delete      NAME   Dawn M. Wolverton   2997 LBJ Freeway #225   Dallas TX 75234   Change   Add   Ad	NAME STREET ADDRESS		☐ Delete	NAMI STRE	E Et address	MGR Dwight L 2997 LB	D. Dumle J Freewa	r		☐ Change	☑ Addition
TITLE Delete TITLE Change Add	NAME STREET ADDRESS		☐ Delete	NAM Stre	e Et address	MGR Dawn M 2997 LB	l. Wolver J Freewa			☐ Change	
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP  11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information	NAME STREET ADDRESS CITY-ST-ZIP			NAM STRE CITY	E et address - st-zip						Addition

NG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE