

2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000025913

**FILED
Jun 03, 2022
Secretary of State
1724071362CC**

Entity Name: MCCI, LLC

Current Principal Place of Business:

3717 APALACHEE PARKWAY
SUITE 201
TALLAHASSEE, FL 32311

Current Mailing Address:

PO BOX 2235
TALLAHASSEE, FL 32316 US

FEI Number: 33-1069550

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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 MANAGER, PRESIDENT
Name BARSTOW, DONALD
Address 3717 APALACHEE PARKWAY, SUITE
 201
City-State-Zip: TALLAHASSEE FL 32311

Title MANAGER
Name SARAFI, MARTIN
Address 3717 APALACHEE PARKWAY, SUITE
 201
City-State-Zip: TALLAHASSEE FL 32311

Title CFO, TREASURER
Name JONES, EMERY
Address 3717 APALACHEE PARKWAY, SUITE
 201
City-State-Zip: TALLAHASSEE FL 32311

Title MANAGER
Name ZACZEPINSKI, GUY
Address 3717 APALACHEE PARKWAY, SUITE
 201
City-State-Zip: TALLAHASSEE FL 32311

Title MANAGER
Name TREVINO, TONY
Address 3717 APALACHEE PARKWAY, SUITE
 201
City-State-Zip: TALLAHASSEE FL 32311

Title MANAGER
Name MUNIZ, JAVIER
Address 3717 APALACHEE PARKWAY
 SUITE 201
City-State-Zip: TALLAHASSEE FL 32311

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: DONALD BARSTOW

PRESIDENT

06/03/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date