2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2022
Secretary of State
1625195824CC

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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	Title	MANAGER
Name	BARSTOW, DONALD	Name	SARAFA, MARTIN
Address	3717 APALACHEE PARKWAY, SUITE 201	Address	3717 APALACHEE PARKWAY, SUITE 201
City-State-Zip:	TALLAHASSEE FL 32311	City-State-Zip:	TALLAHASSEE FL 32311
Title	CFO, TREASURER	Title	MANAGER
Name	MUNIZ, JAVIER	Name	ZACZEPINSKI, GUY
Address	3717 APALACHEE PARKWAY, SUITE 201	Address	3717 APALACHEE PARKWAY, SUITE 201
City-State-Zip:	TALLAHASSEE FL 32311	City-State-Zip:	TALLAHASSEE FL 32311
Title	MANAGER	Title	MANAGER
Name	YARYMOVYCH, NICHOLAS	Name	REVINO, TONY
Address	3717 APALACHEE PARKWAY, SUITE 201	Address	3717 APALACHEE PARKWAY, SUITE 201
City-State-Zip:	TALLAHASSEE FL 32311	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 MANAGER 03/31/2022

Electronic Signature of Signing Authorized Person(s) Detail — Date