

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099533

Entity Name: MYFLAP, LLC

Current Principal Place of Business:

2731 EXECUTIVE PARK DRIVE
SUITE #4
WESTON, FL 33331

Current Mailing Address:

2731 EXECUTIVE PARK DRIVE
SUITE #4
WESTON, FL 33331 US

FEI Number: 20-5699112

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MGR
Name EICAM, INC
Address 1509 GREEN MOUNTAIN DRIVE
City-State-Zip: LITTLE ROCK AR 72211

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: JUNE S. GUILLOT

MEMBER

04/29/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date