Certificate of Status Desired: No		
nt, or both, in the State of Florida.		
nt, or both, in the State of Florida. 04/14/2014		
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04/14/2014 Date ETARY HEWS-GRAY, JUDY L		
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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: BERNARD L. GRAY

PRESIDENT

04/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095599

Entity Name: HIGH MARK MANAGEMENT LLC

Current Principal Place of Business:

FILED Apr 14, 2014 Secretary of State CC3199017292

Date