

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000007182

**Entity Name:** MY MATCH CHECKER LLC

**Current Principal Place of Business:**

2290 10 AVE. NORTH  
SUITE 500  
LAKE WORTH, FL 33461

**Current Mailing Address:**

2290 10 AVE. NORTH  
SUITE 500  
LAKE WORTH, FL 33461

**FEI Number:** 26-4118119

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUCHHOLZ, ROBERT F  
2290 10 AVE. NORTH  
SUITE 500  
LAKE WORTH, FL 33461 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 MGRM  
Name BUCHHOLZ, ROBERT F  
Address 2290 10 AVE. NORTH, SUITE 500  
City-State-Zip: LAKE WORTH FL 33461

Title MGRM  
Name SCOTT, ANDREW JIII  
Address 2290 10 AVE. NORTH, SUITE 500  
City-State-Zip: LAKE WORTH FL 33461

*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:** ROBERT BUCHHOLZ

MMGM

04/23/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date