

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000023534

**Entity Name:** MATCHORMINGLE LLC**Current Principal Place of Business:**467 LAKE HOWELL RD.  
SUITE 201-9  
MAITLAND, FL 32751**Current Mailing Address:**467 LAKE HOWELL RD.  
SUITE 201-9  
MAITLAND, FL 32751 US**FEI Number:** 80-0555564**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KWIMGU CORP.  
467 LAKE HOWELL RD.  
SUITE 201-9  
MAITLAND, FL 32751 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:** CLIVE CAMPBELL

04/14/2013

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGING MEMBER  
Name KWIMGU CORP.  
Address 467 LAKE HOWELL RD.  
SUITE 201-9  
City-State-Zip: MAITLAND FL 32751

Title MANAGING MEMBER  
Name CAMPBELL, CLIVE A  
Address 12901 SW 188 ST  
City-State-Zip: MIAMI FL 33177

Title MANAGING MEMBER  
Name BOAMIS CORPORATION  
Address 17190 SW 138 CT  
City-State-Zip: MIAMI FL 33177

Title MANAGING MEMBER  
Name WHITE, TYRONE  
Address 14865 CLOVERDALE RD  
City-State-Zip: WOODBRIDGE VA 22193

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CLIVE CAMPBELL

MGRM

04/14/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date