#### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000042311

Entity Name: MJ'S ACTIVITY AND RECREATION CENTER, LLC

FILED
Mar 01, 2016
Secretary of State
CC4908065798

# **Current Principal Place of Business:**

3106 SHAMROCK NORTH TALLAHASSEE. FL 32309

# **Current Mailing Address:**

P.O. BOX 38337

TALLAHASSEE, FL 32315

FEI Number: 45-4199122 Certificate of Status Desired: No

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

ANDERSON, KELVIN 3106 SHAMROCK NORTH TALLAHASSEE, FL 32309 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

Date

# Authorized Person(s) Detail:

Title MGRM Title MGRM

NameWHITE, MARYNameANDERSON, KELVINAddressPO BOX 38337Address3106 SHAMROCK NORTHCity-State-Zip:TALLAHASSEE FL 32315City-State-Zip:TALLAHASSEE FL 32309

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: MARY WHITE OWNER 03/01/2016