

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000077069

Entity Name: M SQUARED SYSTEM LLC

Current Principal Place of Business:

MATTHEW COYNE
3200 PALM AIRE DRIVE NORTH #905
POMPANO BEACH, FL 33069

Current Mailing Address:

MATTHEW COYNE
3200 PALM AIRE DRIVE NORTH #905
POMPANO BEACH, FL 33069

FEI Number: 45-3701941

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COYNE, MATTHEW
3200 PALM AIRE DRIVE NORTH #905
POMPANO BEACH, FL 33069 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	Title	MGRM
Name	COYNE, MATTHEW	Name	LANDI, MICHAEL
Address	3200 PALM AIRE DRIVE NORTH #905	Address	10188 NW 48 DRIVE
City-State-Zip:	POMPANO BEACH FL 33069	City-State-Zip:	CORAL SPRINGS FL 33078

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: MATTHEW COYNE

MANAGING PARTNER

03/02/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date