

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000006063

Entity Name: MRFL ALBANY AVE, LLC

Current Principal Place of Business:

4615 W LONGFELLOW AVE
TAMPA, FL 33629

Current Mailing Address:

4615 W LONGFELLOW AVE
TAMPA, FL 33629 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STROTHMAN, NICOLE D
4615 W LONGFELLOW AVE
TAMPA, FL 33629 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 STROTHMAN, NICOLE D
Address 4615 W LONGFELLOW AVE
City-State-Zip: TAMPA FL 33629

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: NICOLE STROTHMAN

MANAGER

04/24/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date