

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000081852

Entity Name: MMS-1 GROUP, LLC.

Current Principal Place of Business:

8400 NW 17TH STREET
DORAL, FL 33126

Current Mailing Address:

8242 NW 36TH STREET
SUITE 211
DORAL, FL 33166

FEI Number: 45-5548018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

M&C ACCOUNTING SERVICES, INC.
8249 NW 36TH STREET
SUITE 211
DORAL, FL 33166 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 MGR
Name SCHONFELD, MAURICIO
Address 8400 NW 17TH STREET
City-State-Zip: DORAL FL 33126

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: MAURICIO SCHONFELD

MGR

04/30/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date