

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000099579

**Entity Name:** MO-MU, LLC

**Current Principal Place of Business:**

2055 BEACH AVE  
ATLANTIC BEACH, 32233

**Current Mailing Address:**

2055 BEACH AVE  
ATLANTIC BEACH, 32233 UN

**FEI Number:** 50-8094627

**Certificate of Status Desired:** No

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

SYNAN, TRACY  
2055 BEACH AVE.  
ATLANTIC BEACH, FL 32233 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           MANAGER  
Name           SYNAN, TRACY M  
Address        2055 BEACH AVE.  
City-State-Zip: ATLANTIC BEACH AL 32233

*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:** TRACY MICHELLE SYNAN

**MGR ROA**

**04/27/2023**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date