

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000201158

Entity Name: XCMDMTS LLC

Current Principal Place of Business:

412 ARBOR CIRCLE
CELEBRATION, FL 34747

Current Mailing Address:

412 ARBOR CIRCLE
CELEBRATION, FL 34747 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCOLLUM, ELIZABETH
412 ARBOR CIRCLE
CELEBRATION, FL 34747 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	Title	MBR
Name	MCCOLLUM, ELIZABETH	Name	MCCOLLUM, FLOYD
Address	412 ARBOR CIRCLE	Address	412 ARBOR CIRCLE
City-State-Zip:	CELEBRATION FL 34747	City-State-Zip:	CELEBRATION FL 34747

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: ELIZABETH W MCCOLLUM

MGMBR

01/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date