2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000214517

Entity Name: MCMS PROPERTIES LLC

Current Principal Place of Business:

302 N. HOWARD AVE. TAMPA. FL 33606

Current Mailing Address:

302 N. HOWARD AVE. TAMPA, FL 33606 US

FEI Number: 84-2928565 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIESER SKAFF, PLLC 403 N. HOWARD AVE. TAMPA, FL 33606 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: GHADA SKAFF 01/22/2024

Electronic Signature of Registered Agent

Date

FILED Jan 22, 2024

Secretary of State

9214953791CC

Authorized Person(s) Detail :

Title AMBR Title AMBR

Name AHRENS, MATTHEW Name AHRENS, SARA

Address 302 N. HOWARD AVE. Address 302 N. HOWARD AVE.

City-State-Zip: TAMPA FL 33606 City-State-Zip: TAMPA FL 33606

Title AMBR Title AMBR

NameMCILWAIN, MICHAELNameMCILWAIN, CRISTINAAddress302 N. HOWARD AVE.Address302 N. HOWARD AVE.City-State-Zip:TAMPA FL 33606City-State-Zip:TAMPA FL 33606

Title AMBR Title AMBR

Name FORD, KARA Name FORD, STEVEN

Address 302 N. HOWARD AVE. Address 302 N. HOWARD AVE.

City-State-Zip: TAMPA FL 33606 City-State-Zip: TAMPA FL 33606

Title AMBR Title AMBR

NameWARNKEN, REBECCANameWARNKEN, MATTHEWAddress302 N. HOWARD AVE.Address302 N. HOWARD AVE.City-State-Zip:TAMPA FL 33606City-State-Zip:TAMPA FL 33606

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: MICHAEL MCILWAIN AMBR

Electronic Signature of Signing Authorized Person(s) Detail

01/22/2024 Date