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. 04/20/2020

OWNER

SIGNATURE: RALPH J MYERS

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business:

Entity Name: MB1 ENTERPRISES LLC

3845 BAYMEADOWS JACKSONVILLE, FL 32217

Current Mailing Address:

1441 RIVA DEL GARDA WAY ST. AUGUSTINE FL 32092 US

FEI Number: 84-4059495

Name and Address of Current Registered Agent:

MYERS, RALPH J 1441 RIVA DEL GARDA WAY ST. AUGUSTINE, FL 32092 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

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	MYERS, RALPH J	Name	MYERS, KHRISTINA Y
Address	1441 RIVA DEL GARDA WAY	Address	1441 RIVA DEL GARDA WAY
City-State-Zip:	ST. AUGUSTINE FL 32092	City-State-Zip:	ST. AUGUSTINE FL 32092

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L2000000770

FILED Apr 20, 2020 Secretary of State 4877292834CC

Certificate of Status Desired: No

Date

Date