

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000041327

**Entity Name:** MHCI GROUP, LLC

**Current Principal Place of Business:**

424 LUNA BELLA LN STE 120B  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

301 MISSION DR UNIT 706  
NEW SMYRNA BEACH, FL 32170-0706 US

**FEI Number:** 86-2388629

**Certificate of Status Desired:** No

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

POSTILL, JASON J  
301 MISSION DR UNIT 706  
NEW SMYRNA BEACH, FL 32170-0706 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	MGR
Name	POSTILL, JASON	Name	LEKAS, TYLER
Address	424 LUNA BELLA LN STE 120B	Address	424 LUNA BELLA LN STE 120B
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	NEW SMYRNA BEACH FL 32168

*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:** JASON POSTILL

MGR

01/26/2022

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

\_\_\_\_\_  
Date