

*** AMENDED ***
2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

05-05-2003 91816 001 ***110.00
 L02000004393

FILED

03-SEP 16 AM 9:00

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

44005796

MJH

DOCUMENT # L02000004393

1. Entity Name

MYMISDEPARTMENT, LLC



Principal Place of Business

12472 LAKE UNDERHILL RD. #324
 ORLANDO FL 32828

Mailing Address

12472 LAKE UNDERHILL RD. #324
 ORLANDO FL 32828

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2173 Kaylas Ct

City & State

Orlando, FL

City & State

Zip

32817

Country

USA

Zip

Country

4. FEI Number

611406045

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

TIRADO-CHIODINI, YASMIN ESQ.
 12472 LAKE UNDERHILL RD. #122
 ORLANDO FL 32828

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Chip Wiggins

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/15/2003

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
 Due By September 24, 2003**

9a. MANAGING MEMBERS/MANAGERS

TITLE: MGRM
 NAME: WIGGINS, CHIP
 STREET ADDRESS: 12472 LAKE UNDERHILL RD. #324
 CITY-ST-ZIP: ORLANDO FL 32828 ☐ Delete

TITLE: MGRM
 NAME: DRISGILL, RANDY
 STREET ADDRESS: 12472 LAKE UNDERHILL RD. #324
 CITY-ST-ZIP: ORLANDO FL 32828 ☒ Delete

TITLE: MGRM
 NAME: MOTT, RAY
 STREET ADDRESS: 12472 LAKE UNDERHILL RD. #324
 CITY-ST-ZIP: ORLANDO FL 32828 ☒ Delete

TITLE: MGRM
 NAME: Bob Pollack MD
 STREET ADDRESS: 12472 Lake Underhill Rd #324
 CITY-ST-ZIP: Orlando FL, 32828 ☒ Delete

TITLE: MGRM
 NAME: Sammy Shehata
 STREET ADDRESS: 2173 Kaylas Ct.
 CITY-ST-ZIP: Orlando FL 32817 ☐ Delete

TITLE: MGRM
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
☐ Delete

10. ADDITIONS/CHANGES

TITLE: MGRM
 NAME: Sammy Shehata
 STREET ADDRESS: 2173 Kaylas Ct.
 CITY-ST-ZIP: Orlando, FL 32817 ☐ Change ☒ Addition

TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
☐ Change ☐ Addition

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 STREET ADDRESS:
 CITY-ST-ZIP:
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

Chip Wiggins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

7/15/2003

DATE

Daytime Phone #

CR2E083 (4/03)