

ANNUAL REPORT

DOCUMENT # L03000016985

1. Entity Name
N&M LOGISTICS L.L.C.

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90012 027 ****50.00

Principal Place of Business

15676 SW 52ND CT
MIRAMAR, FL 33027

Mailing Address

15676 SW 52ND CT
MIRAMAR, FL 33027

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

81-0617155

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301-0000

7. Name and Address of New Registered Agent

Name COURTNEY O COKE

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

15676 SW 52ND CT

City MIRAMAR

FL

Zip Code 33027

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7/2/04

Filing Fee is \$50.00
Due by September 8, 2004Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	MGRM	COKE, COURTNEY	15676 SW 52ND CT MIRAMAR, FL 33027	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	MGRM	SMITH-COKE, WINSOME	15676 SW 52ND CT MIRAMAR, FL 33027	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

10. ADDITIONS/CHANGES

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

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

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

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

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

TITLE	NAME	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:

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

7/2/04 954-325-5219

RECEIVED IN 2004
 JUL 15 2004
 SECRETARY OF STATE

RECEIVED IN 2004
 JUL 15 2004
 SECRETARY OF STATE

N&M LOGISTICS L.L.C.

DOCUMENT # L03000016985

