

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000041766

FILED  
Nov 01, 2004  
Secretary of State

Entity Name: MM, LLC

**Current Principal Place of Business:**

285 HIGHWAY 98 EAST  
SUITE C  
DESTIN, FL 32541

**New Principal Place of Business:**

150B AZALEA DRIVE  
DESTIN, FL 32541

**Current Mailing Address:**

285 HIGHWAY 98 EAST  
SUITE C  
DESTIN, FL 32541

**New Mailing Address:**

150B AZALEA DRIVE  
DESTIN, FL 32541

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DOWD, JOHN R JR  
285 HIGHWAY 98 EAST  
SUITE C  
DESTIN, FL FL US

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

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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SULLIVAN, MARK  
Address: 285 HIGHWAY 98 EAST, SUITE C  
City-St-Zip: DESTIN, FL 32541

Title: MGRM ( ) Delete  
Name: CLANCY, MAUREEN L  
Address: 285 HIGHWAY 98 EAST, SUITE C  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SULLIVAN, MARK  
Address: 150B AZALEA DRIVE  
City-St-Zip: DESTIN, FL 32541

Title: MGRM (X) Change ( ) Addition  
Name: CLANCY, MAUREEN L  
Address: 150B AZALEA DRIVE  
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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 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 608, Florida Statutes.

SIGNATURE: MARK SULLIVAN

MGRM

11/01/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date