

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001431

Entity Name: M/M ENTERPRISES, LLC

FILED  
Jul 05, 2006  
Secretary of State

**Current Principal Place of Business:**

6235 IKE'S CABIN CT.  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

6235 IKE'S CABIN CT.  
PALMETTO, FL 34221

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MCKEE, MATT  
6235 IKE'S CABIN CT.  
PALMETTO, FL 34221 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MCKEE, MATT  
Address: 6235 IKE'S CABIN CT.  
City-St-Zip: PALMETTO, FL 34221

Title: MGRM ( ) Delete  
Name: MILAN, MARK  
Address: 127 N. TRYON ST. #611  
City-St-Zip: CHARLOTTE, NC 28202

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MATT MCKEE

MGRM

07/05/2006

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