

**L04000040933**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A.  
Account Number : 076424003301  
Phone : (813) 223-7474  
Fax Number : (813) 227-0435

11-2239/PAL

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: jcerry@bocagrandelaw.com

LLC REGISTERED AGENT CHANGE  
MMI AND DAUGHTERS, LLC

Certificate of Status	0
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SEP 29 2011

EXAMINER

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: MMI and Daughters, LLC

2. (a) Principal office address of limited liability company: 421 Palm Ave

(Note: **MUST BE STREET ADDRESS**)

Boca Grande, FL 33921

(b) Mailing address of limited liability company: P.O. Box 31

(Note: **MAY BE POST OFFICE BOX**)

Boca Grande, FL 33921

5/24/2004

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3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Michael M. Ingram, PA

Registered Office Address:

431 Palm Ave  
Boca Grande, FL 33921

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

Jamie Curry

**NEW Registered Office Address:**

431 Palm Avenue

(**MUST BE FLORIDA STREET ADDRESS**)

Boca Grande, FL 33921

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Mary Mayhew Ingram  
Signature of a member or authorized representative of a member

Mary Mayhew Ingram, authorized representative  
Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Jamie Curry  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

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