2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000085276

Name:

Address:

City-St-Zip:

LOYD, JOY C

1037 VIA COMO PLACE

LAKE MARY, FL 32746

Entity Name: MJM ENTERPRISES I, LLC

FILED Oct 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1037 VIA COMO PLACE LAKE MARY, FL 32746 **Current Mailing Address: New Mailing Address:** 1037 VIA COMO PLACE LAKE MARY, FL 32746 FEI Number: 20-1970848 FEI Number Applied For () FEI Number Not Applicable () 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: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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: MARC LOYD Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete LOYD, MARC H Name: Name: Address: 1037 VIA COMO PLACE Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: LOYD, JOY C Name: Address: 1037 VIA COMO PLACE Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: () Delete Title: () Change () Addition LOYD, MARC H Name: Name: 1037 VIA COMO PLACE Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARC LOYD MGR 10/06/2005