

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000025615

Entity Name: MRW, ENTERPRISES, LLC

FILED
Mar 02, 2007
Secretary of State

Current Principal Place of Business:

200 HOSPITAL DRIVE
#32
CRESTVIEW, FL 32539

New Principal Place of Business:

7419 PINE LAKE CIRCLE
MILTON, FL 32570 US

Current Mailing Address:

200 HOSPITAL DRIVE
#32
CRESTVIEW, FL 32539

New Mailing Address:

7419 PINE LAKE CIRCLE
MILTON, FL 32570 US

FEI Number: 20-2517658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

WILLIAMS, MICHAEL R
200 HOSPITAL DRIVE
#32
CRESTVIEW, FL 32539 US

Name and Address of New Registered Agent:

WILLIAMS, MICHAEL R
7419 PINE LAKE CIRCLE
MILTON, FL 32570 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: MICHAEL R WILLIAMS

03/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: WILLIAMS, MICHAEL R MGRM
Address: 7419 PINE LAKE CIRCLE
City-St-Zip: MILTON, FL 32570 US

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: MICHAEL R WILLIAMS

MGRM

03/02/2007

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