2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED

/ !	Mar 13, 2006 8:00 am
	Secretary of State
	01 00 2006 00050 021 ****50 00

DOCUMENT #L05000110507 1. Entity Name NMV HOLDINGS, LLC Principal Place of Business Mailing Address 30004330 **4925 SHERIDAN STREET 4925 SHERIDAN STREET** SUITE 102 SUITE 102 HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 2. Principal Place of Business 2699 Stilling 3. Mailing Address 2699 Shilling Suite, Apr. 1, etc. 01052006 Chg-LLC CR2E083 (11/05) Applied For City & State -4. FEI Number つひ Not Applicable Zip 333 12 \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent THE LAW OFFICE OF NYDIA MENENDEZ, LLC **4925 SHERIDAN STREET** Change of address **SUITE 102** HOLLYWOOD, FL 33021 Zip Coda ろろろして Fort Landerdale 8. The above named entity submits this statem for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed nerve of registered (pent and bite it population. (NOTE: Registered Agent signature required when rainstating) Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10 ADDITIONS/CHANGES TITLE MGR TITLE MGR Change Delete Addition MENENDEZ, NYDIA Menendez, Nydia 2699 Stirling Road, Swite 8 200 NAME NAVE STREET ADDRESS 4925 SHERIDAN STREET, SUITE 102 STREET ADORESS CITY-ST-ZIP HOLLYWOOD, FL 33021 For Landerdale, Morida 333/2 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITI F ☐ Channe ☐ Addition NAME. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete MLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-71P CITY-ST-ZIP TITLE Delete TATLE ☐ Change Addition NAME MALE STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company or the receiver or fusion as required by Chapter 608, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OR PRINTED RAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE



ATTACHMENT 3000233Le

FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 12, 2006

NMV HOLDINGS, LLC **4925 SHERIDAN STREET** SUITE 102 HOLLYWOOD, FL 33021

3/8/06 FEIN Hasbeen inserted audiens converted

Subject: NMV HOLDINGS, LLC

Reference Number:

L05000110507

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/al ANNUAL REPORTS SECTION