

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039636

Entity Name: MX2 LLC

FILED
May 03, 2007
Secretary of State

Current Principal Place of Business:

4812 SW 163RD PLACE
MIAMI, FL 33185 US

New Principal Place of Business:

9684 PICCADILLY SKY WAY
ORLANDO, FL 32827 US

Current Mailing Address:

4812 SW 163RD PLACE
MIAMI, FL 33185 US

New Mailing Address:

6445 S. CHICKASAW TRAIL
#314
ORLANDO, FL 32829 US

FEI Number: 20-4803790 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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: MCKITTERICK, MICHAEL L
Address: 4812 SW 163RD PLACE
City-St-Zip: MIAMI, FL 33185 US

Title: MGRM () Delete
Name: SILLINCE, MICHAEL R
Address: 5214 NE 3RD COURT
City-St-Zip: MIAMI, FL 33137 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCKITTERICK, MICHAEL L
Address: 9684 PICCADILLY SKY WAY
City-St-Zip: ORLANDO, FL 32827 US

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

I hereby certify that the information supplied with this filing does not qualify 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 MCKITTERICK

MR

05/03/2007

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