

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000064766

Entity Name: THE MIELKE WAY LLC

**FILED**  
**May 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1048 HWY 98 EAST, #501W  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

133 TIMMONS RD  
CHAPIN, SC 29036

**New Mailing Address:**

FEI Number: 20-8648156

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MIELKE, BLAIR  
1048 HWY 98 EAST, #501 WEST  
DESTIN, FL 32541 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  
Name: MIELKE, BLAIR C  
Address: 1048 HWY 98 EAST, #501W  
City-St-Zip: DESTIN, FL 32541

Title: MGRM  
Name: MIELKE, TODD  
Address: 133 TIMMONS RD  
City-St-Zip: CHAPIN, SC 29036

I hereby 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: BLAIR MIELKE

MGRM

05/02/2011

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