05-16-2008 90187 017 ***538.75

L07000007244

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

08 OCT 27 AM 8:05

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # L07000007244

1. Entity Name
M & H CONSTRUCTION L.L.C.

Principal Place of Business	Mailing Address
228 PHEASANT RUN COURT LONGWOOD, FL 32779	228 PHEASANT RUN COURT LONGWOOD, FL 32779

04222008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-2273192 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TURNER, WALTER 22602 YOUNG ROAD EUSTIS, FL 32736	Name Maria D. Rosto Street Address (P.O. Box Number is Not Acceptable) 3044 Orcans Way N City Apopka FL Zip Code 32703

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Maria D Rosto 05/05/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MCGREGOR, WILLIAM T 228 PHEASANT RUN COURT LONGWOOD, FL 32779	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HERNANDEZ, FERNANDO P.O. BOX 770661 WINTER GARDEN, FL 34777	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mr. MCGregor GAVE AUTHORIZATION BY PHONE TO CONTACT FEI # DATE 10/28/08 BUS. EXAM. LSellers	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 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: William T. McGregor Apr. 15, 2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #