

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000126775

Entity Name: MIH 2DAY LLC

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

20223 SW 52 PLACE  
PEMBROKE PINES, FL 33332

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 267802  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 26-1781523

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CHADES, JOHN N  
20223 SW 52 PLACE  
PEMBROKE PINES, FL 33332 US

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

CHADES, JOHN N PRES  
20223 SW 52 PLACE  
PEMBROKE PINES, FL 33332 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: JOHN CHADES

04/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHADES, JOHN N PRES  
Address: PO BOX 267802  
City-St-Zip: WESTON, FL 33326

Title: VP  
Name: CHADES, MARIA E VP  
Address: PO BOX 267802  
City-St-Zip: WESTON, FL 33326

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: JOHN CHADES

PRES

04/04/2012

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