

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000014467

FILED
Jul 09, 2009
Secretary of State**Entity Name:** M3 RESTAURANT GROUP, LLC**Current Principal Place of Business:**2633 BOGOTA AVE
COOPER CITY, FL 33026 US**New Principal Place of Business:****Current Mailing Address:**2633 BOGOTA AVE
COOPER CITY, FL 33026 US**New Mailing Address:****FEI Number:** 26-1968341 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****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:** MGR () Delete
Name: AM MOTU HOLDINGS, LLC
Address: 3982 REDFORD COURT
City-St-Zip: NEW ALBANY, OH 43054 US**Title:** MGR () Delete
Name: 5 SCOTS, LLC
Address: 7335 SOUTHFIELD ROAD
City-St-Zip: NEW ALBANY, OH 43054 US**Title:** MGR () Delete
Name: 2M LOGIX, LLC
Address: 2633 BOGOTA AVE
City-St-Zip: COOPER CITY, FL 33026 US**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: AM MOTU HOLDINGS, LLC
Address: 2633 BOGOTA AVE
City-St-Zip: COOPER CITY, FL 33026 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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: MARC MENDOZA

MGR

07/09/2009

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