## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000021861

Entity Name: MJ UNLIMITED, LLC

Name:

Address:

City-St-Zip:

KARBOWSKI, JAMIE A

4340 S. TOM AVENUE

INVERNESS, FL 34452

FILED May 13, 2009 Secretary of State

() Change () Addition

**Current Principal Place of Business: New Principal Place of Business:** 4340 S. TOM AVENUE INVERNESS, FL 34452 US **Current Mailing Address: New Mailing Address:** 4340 S. TOM AVENUE INVERNESS, FL 34452 US FEI Number: 26-2068951 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: COHEN, DIANE ESQ. 111 W. MAIN STREET SUITE 203 INVERNESS, FL 34450 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM ( ) Delete Title: () Change () Addition MAULDIN, MICHAEL J Name: Name: Address: 4340 S. TOM AVENUE Address: City-St-Zip: INVERNESS, FL 34452 US City-St-Zip: Title: MGRM (X) Delete Title:

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 J MAULDIN **MGRM** 05/13/2009