2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000033593

Entity Name: MF FRANCHISE LLC

MIAMI, FL 33196

FILED Oct 14, 2009 Secretary of State

() Change () Addition

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Business.	New Fillicipal Flace of Busiliess.

16508 SW 97 ST 825 BRICKELL BAY DRIVE

SUITE 1846

MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

825 BRICKELL BAY DRIVE 16508 SW 97 ST MIAMI, FL 33196

SUITE 1846 MIAMI, FL 33131

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

SLC CORPORATE SERVICES, INC. MARQUEZ, FARAH 825 BRICKELL BAY DRIVE 1001 BRICKELL BAY DRIVE #3112 SUITE 1846 MIAMI, FL 33131 US MIAMI, FL 33131 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: FARAH MARQUEZ 10/14/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

ARQUITEC, S.A. Name: Name: Address: 1001 BRICKELL BAY DRIVE, #3112 Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip:

Title: MGRM Title:

() Delete ASSURANCE GENERAL AGENCY, CORP. Name: Name: Address: 16508 SW 97 STREET Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip:

Title: () Delete Title: MGR () Change (X) Addition

Name: MENDOZA, GILBERTO Name:

825 BRICKELL BAY DRIVE, SUITE 1846 Address: Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33131

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: GILBERTO MENDOZA 10/14/2009