# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Aug 21, 2009**
**Secretary of State**

DOCUMENT# L08000076241

**Entity Name:** MORIMM GROUP LLC

| **Current Principal Place of Business:** | **New Principal Place of Business:** |
|---|---|
| 136 BELLA VISTA WAY<br>ROYAL PALM BEACH, FL 33411    US | 4613 N UNIVERSITY DRIVE #374<br>CORAL SPRINGS, FL 33067    US |

| **Current Mailing Address:** | **New Mailing Address:** |
|---|---|
| 136 BELLA VISTA WAY<br>ROYAL PALM BEACH, FL 33411    US | 4613 N UNIVERSITY DRIVE #374<br>CORAL SPRINGS, FL 33067    US |

FEI Number: 26-3132628       FEI Number Applied For ( )       FEI Number Not Applicable ( )       Certificate of Status Desired ( )
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:** |
|---|---|
| MORA, CRAIG<br>136 BELLA VISTA WAY<br>ROYAL PALM BEACH, FL 33411    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:**

| | |
|---|---|
| Title:    MGRM    ( ) Delete<br>Name:    MORA, CRAIG<br>Address:    136 BELLA VISTA WAY<br>City-St-Zip:    ROYAL PALM BEACH, FL 33411 US | Title:                    ( ) Change ( ) Addition<br>Name:<br>Address:<br>City-St-Zip: |
| Title:    MGRM    ( ) Delete<br>Name:    GRIMM, PATRICK<br>Address:    4722 NW 96 DRIVE<br>City-St-Zip:    CORAL SPRINGS, FL 33076 US | Title:    MGRM    (X) Change ( ) Addition<br>Name:    GRIMM, PATRICK<br>Address:    4613 N UNIVERSITY DRIVE #374<br>City-St-Zip:    CORAL SPRINGS, FL 33067 US |

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:  PATRICK GRIMM                                    MGRM                    08/21/2009

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