## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084501

**Current Principal Place of Business:** 

Entity Name: AMERICAN MIXED MARTIAL ARTS, LLC

FILED Jun 22, 2009 Secretary of State

| 10555 66TH ST - UNIT A<br>PINELLAS PARK, FL 33782  | 10555 66TH ST<br>UNIT A<br>PINELLAS PARK, FL 33782                            |
|--|---|
| Current Mailing Address:   | New Mailing Address:  |
| 10555 66TH ST - UNIT A<br>PINELLAS PARK, FL 33782  | 10555 66TH ST<br>UNIT A<br>PINELLAS PARK, FL 33782                            |
| FEI Number: 26-2958966 FEI Number Applied For<br>In accordance with s. 607.193(2)(b), F.S., the limited liab<br>Name and Address of Current Registered Age | ility company did not receive the prior notice.                               |
| MCFARLIN, JAMES<br>14513 MARK DR<br>LARGO, FL 33774 US   |   |
| The above named entity submits this statement foin the State of Florida.   | or the purpose of changing its registered office or registered agent, or both |
| SIGNATURE:   |   |
| Electronic Signature of Register   | ed Agent Date   |

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete Name: BYBEE, DAVID

Address: 11386 87TH AVE N
City-St-Zip: SEMINOLE, FL 33772

Title: ( ) Delete

Name: Address: City-St-Zip: ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition

**New Principal Place of Business:** 

Name: Address: City-St-Zip:

Title: MGRM ( ) Change (X) Addition

Name: BYBEE, AMY
Address: 11386 87TH AVE N
City-St-Zip: SEMINOLE, FL 33782

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: DAVID BYBEE MGRM 06/22/2009