

**2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000028602

**FILED  
Feb 18, 2013  
Secretary of State**

**Entity Name:** M & M MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

539 SAMUEL STREET  
DAVENPORT, FL 33897

**New Principal Place of Business:**

950 1ST STREET SOUTH STE 203  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

P.O. BOX 121  
DAVENPORT, FL 33850

**New Mailing Address:**

P.O. BOX 121  
LAKE ALFRED, FL 33850

**FEI Number:** 26-4545896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLERMONT, MAXO  
539 SAMUEL ST  
DAVENPORT, FL 33897 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: MAXO CLERMONT

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRS  
Name: CLERMONT, MAXO  
Address: 539 SAMUEL STREET  
City-St-Zip: DAVENPORT, FL 33897

I hereby 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: MAXO CLERMONT

MGMR

02/18/2013

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