

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000104761

Entity Name: MTM ICE CART, LLC

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9902 GULF COAST MAIN STREET, SUITE 145  
FORT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

9902 GULF COAST MAIN STREET  
FORT MYERS, FL 33913

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

MACIK, MILES T  
12512 WILDCAT COVE CIRCLE  
ESTERO, FL 33928 US

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

MACIK, MICHAEL T  
12351 WATER OAK DR  
ESTERO, FL 33928 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: MICHAEL T. MACIK

04/17/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MTM ICE I, LLC  
Address: 9902 GULF COAST MAIN STREET, SUITE 145  
City-St-Zip: FORT MYERS, FL 33913

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: MTM ICE I, LLC -MILES T. MACIK MGRM

MGRM

04/17/2012

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