

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000078752

Entity Name: M & M TRAVEL, LLC

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

**Current Principal Place of Business:**

792 REGAL COVE ROAD  
WESTON, FL 33327 US

**New Principal Place of Business:**

1419 ST GABRIELLE LN  
4001  
WESTON, FL 33326 US

**Current Mailing Address:**

792 REGAL COVE ROAD  
WESTON, FL 33327 US

**New Mailing Address:**

1419 ST GABRIELLE LN  
4001  
WESTON, FL 33326 US

FEI Number: 27-3120027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GONYEA, MICHELLE  
792 REGAL COVE ROAD  
WESTON, FL 33327 US

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

GONYEA, MICHELLE  
1419 ST GABRIELLE LN  
4001  
WESTON, FL 33326 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: MICHELLE GONYEA

01/17/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GONYEA, MICHELLE  
Address: 1419 ST GABRIELLE LN #4001  
City-St-Zip: WESTON, FL 33326 US

Title: MGR  
Name: PORRAS, BERTHA M  
Address: 1419 ST GABRIELLE LN  
City-St-Zip: WESTON, FL 33326 US

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: MICHELLE GONYEA

MGR

01/17/2012

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