

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000021386

Entity Name: MAX RETURN, LLC

**FILED**  
**Mar 01, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

19406 BRUCE B. DOWNS BLVD 118  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

19406 BRUCE B. DOWNS BLVD 118  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 80-0686253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MEJIA, JUAN M  
2780 E. FOWLER AVE  
148  
TAMPA, FL 33612 US

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

MEJIA, JUAN M  
19402 VIA DEL MAR  
APT 203  
TAMPA, FL 33647 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: JUAN M MEJIA

03/01/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MEJIA, JUAN M  
Address: 19402 VIA DEL MAR, APT 203  
City-St-Zip: TAMPA, FL 33647

Title: MGR  
Name: MEJIA, Yael M  
Address: 19402 VIA DEL MAR, APT 203  
City-St-Zip: TAMPA, FL 33647

Title: MGR  
Name: MEJIA, JONAH E  
Address: 19402 VIA DEL MAR, APT 203  
City-St-Zip: TAMPA, FL 33612

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: JUAN M MEJIA

MGR

03/01/2013

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