

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000124014

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** MYKEDYL L.L.C.

**Current Principal Place of Business:**

605 NE 123 STREET  
MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 640062  
MIAMI, FL 33164

**New Mailing Address:**

**FEI Number:** 45-3715942

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COMPAS, CARL  
15163 NE 6 AVE  
MIAMI, FL 33162 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:**

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** ALEXANDRE, MYRLANDE  
**Address:** 1231 NE 141 STREET  
**City-St-Zip:** NMIAMI, FL 33161

**Title:** MGR  
**Name:** COMPAS, CARL  
**Address:** 15163 NE 6 AVE  
**City-St-Zip:** MIAMI, FL 33162

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:** CARL COMPAS

RA

04/27/2012

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