

1999 ANNUAL REPORT
APPLICATION FOR REPORT
FOR
LIMITED LIABILITY COMPANY

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

188.75
FILED 12/5/24
99 MAY 14 AM 9:20

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
MRR, LLC DBA MRR Operations, LLC
303 Peachtree Street, NE Suite 410
Atlanta, Georgia 30308

DOCUMENT # 19600000181

SECRETARY OF STATE
ALL AMESSEE FLORIDA

1a. Principal Place of Business Address
303 Peachtree Street, NE
Suite # 410
Atlanta GA 30308

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

2a. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Organized or Qualified
5/22/96

3a. State of Formation
Georgia

4. FEI Number
58-2238522

5. Date of Last Report
10/07/97

6. Certificate of Status Desired
\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent
CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324

8. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
500002885725-3
Suite, Apt. #, etc.
-05/25/90--01063--005
City
****188.75 ****188.75
Zip Code
FL

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent

Date

10. Title	Managing Members/Managers	Business Street Address	City, State & Zip Code
	James C. Richards	303 Peachtree Street NE Suite #410	Atlanta GA 30308

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager
James C. Richards

Date
5/10/99

Daytime Phone #
404-572-7270

Typed or printed name of signing Managing Member/Manager
James C. Richards