

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023906

Entity Name: MFEP LLC

Current Principal Place of Business:

16345 NOLEN RD
DADE CITY, FL 33523

Current Mailing Address:

PO BOX 914
DADE CITY, FL 33526 US

FEI Number: 20-4478483

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOWLER-CORLEY & ASSOCIATES
5450 BRUCE B. DOWNS BLVD SUITE 323
WESLEY CHAPEL, FL 33544 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name EDWARDS, MATT F
Address 16345 NOLEN RD
City-State-Zip: DADE CITY FL 33523

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MATT F. EDWARDS

PRESIDENT

04/15/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date