

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000057339

Entity Name: MEDALLION CONTAINER RELIANT, LLC

Current Principal Place of Business:

27805 SW 197 AVENUE
HOMESTEAD, FL 33031

Current Mailing Address:

27805 SW 197 AVENUE
HOMESTEAD, FL 33031

FEI Number: 27-2694360

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEVIN D. MERCER, P.A.
10800 BISCAYNE BLVD
700
MIAMI, FL 33161 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: KM

04/29/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name MEDALLION CONTAINER NURSERIES, LLC
Address 27805 SW 197 AVENUE
City-State-Zip: HOMESTEAD FL 33031

Title MGRM
Name MERMELL, CLIFFORD R
Address 8603 S. DIXIE HWY, SUITE 205
City-State-Zip: MIAMI FL 33143

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MEDALLION CONTAINER NURSERIES, LLC

MGRM

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date