

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000106579

**Entity Name:** MML, LLC

**Current Principal Place of Business:**

3923 CASCADE TERRACE  
WESTON, FL 33332

**Current Mailing Address:**

3923 CASCADE TERRACE  
WESTON, FL 33332

**FEI Number:** 90-0620968

**Certificate of Status Desired:** No

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

LOUREIRO, MANOEL  
3923 CASCADE TERRACE  
WESTON, FL 33332 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 LOUREIRO, MANOEL  
Address 3923 CASCADE TERRACE  
City-State-Zip: WESTON FL 33332

*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:** MANOEL LOUREIRO

MGRM

03/04/2015

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date