

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000138348

Entity Name: MONKEEVINZ, LLC

Current Principal Place of Business:

3539 APALACHEE PARKWAY
#190
TALLAHASSEE, FL 32311

Current Mailing Address:

3539 APALACHEE PARKWAY
#190
TALLAHASSEE, FL 32311

FEI Number: 45-3999005

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANCE, BELINDA TESQ.
2073 SUMMIT LAKE DRIVE
SUITE 154
TALLAHASSEE, FL 32317 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 PS
Name MAZERAC, KIM
Address 3539 APALACHEE PARKWAY, #190
City-State-Zip: TALLAHASSEE FL 32311

Title VPT
Name OWEN, TERESSA C
Address 3539 APALACHEE PARKWAY, #190
City-State-Zip: TALLAHASSEE FL 32311

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: TERESSA C. OWEN

**CHIEF EXECUTIVE
OFFICER**

03/03/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date