

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000189239

**Entity Name:** MV4 ENTERPRISES, LLC

**Current Principal Place of Business:**

3030 N ROCKY POINT DR STE 150A  
TAMPA, FL 33607

**Current Mailing Address:**

390 SOUTH ROAD, RD4  
NEW PLYMOUTH, TK 4374 NZ

**FEI Number:** 47-3072649

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT, LLC  
3030 N ROCKY POINT DR STE 150A  
TAMPA, FL 33607 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	MGR	Title	MANAGER
Name	WEST, GAYLEEN	Name	BRYAN, WEST CHARLES MR
Address	390 SOUTH ROAD, RD4	Address	390 SOUTH ROAD, RD4
City-State-Zip:	NEW PLYMOUTH TK 4374	City-State-Zip:	NEW PLYMOUTH TARANAKI 4374

*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:** GAYLEEN WEST

**MANAGER**

**03/05/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date