

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000000131

Entity Name: 6329 MIDNIGHT PASS, LLC

Current Principal Place of Business:

6980 OAK ST
ARVADA, CO 80004

Current Mailing Address:

PO BOX 1837
ARVADA, CO 80001

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 E 6TH AVE
TALLAHASSEE, FL 32303 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
Name FURBER, THOMAS R
Address 6980 OAK ST
City-State-Zip: ARVADA CO 80004

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: THOMAS R. FURBER

MGR

01/07/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date