Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (650) 617-6383

From:

Account Name : LEGALZOGM.COM INC.

Account Number : 120010000062 Phone : (323) 962-8600 Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE MK MAINTENANCE SOLUTIONS LLC

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4/27/2016

COVER LETTER

	egistration Section livision of Corporations		
SUBJEC	T: MK MAINTENANCE SOLU	TIONS LLC	
		ne of Limited Lia	ability Company
Dear Sir o	or Madain:		
The enclo	sed Registered Agent/Registered Off	ice Change and f	fee(s) are submitted for filing.
Please rer	urn all correspondence concerning th	is matter to the f	ollowing:
Cheyen	ne Moseley		
	Name of Person		-
Legalzo	om.com, Inc.		
	Firm/Company		-
101 N. E	Brand Blvd., 10th Floor		
	Address		-
Glendal	e, CA 91203		
	City/State and Zip Code		
joe.dam	nicom@gmail.com		
E-m	ail address: (to be used for future ann	ual report notific	cation)
For furthe	er information concerning this matter,	please call:	
Imelda \	√asquez	323	962-8600 x7950
	Name of Person		Area Code & Daytime Telephone Number
R D C 20	TREET/COURIER ADDRESS: egistration Section vivision of Corporations fifton Building 661 Executive Center Circle allahassee, Florida 32301	Reg Div P.O	istration Section ision of Corporations . Box 6327 ahassee, Florida 32314
E	nclosed is a check for the following	amount;	
	1 \$25 Filing Fee	□ \$5:	5 Filing Fee & Certified Copy
INHS18 (2	V14)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605,0114 or 605,0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	nne of the limited liability company: $\underline{\underline{N}}$	IK MAINTEN	ANCE	SOLUTIO	NS LLC		
			(b)				
_, (,	Principal office address of limited liabil (Note: MUST RE STREET ADD		(17)	M	iniling address of limit (Note: MAY BE PO		
	6840 DARTMOUTH AVE N.			6840 DA	RTMOUTH AV	E N.	
	SAINT PETERSBURG, FL 337	10	-	SAINT P	ETERSBURG,	FL 337	10
	03/10/2016			L1600004	8747		
3.	Date of filing/registration in F	lorida	4,		Document number	r	
5. (a)							
J. (a)	Registered Agent and Registered Office shown JOSEPH M D'AMICO	on the records of th	e Florida	Dept. of State	:		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
	6840 DARTMOUTH AVE N.					rs.a	
	SAINT PETERSBURG	, FL_3	3710		100 mg	i min vers	war hagarita
		· · · · · ·			ini fir	Ć.	VIII.
(b)	Enter name of NEW Registered Agent and/or				88	\sim	ì
	Enter name of NEW Registered Agent and/or	NEW Registered C	ffice add	ress:	E O		
	UNITED STATES CORPORATION AGENTS, INC.						D
	NEW Registered Office Address:				REF.	2(
	13302 WINDING OAK COURT SUITE A						
					· •		;
	TAMPA	, FL_	33612				
the chagent was/w the art larger larg	limited liability company is not organize ange or changes are made, the Florida st will be identical. Or, in the case of a Floride st will be identical. Or, in the case of a Florie authorized by an affirmative vote of itcles of organization of the operating against of a member in buthorized representative of the accept the appointment as registered ions of all statutes relative to the proper lightness of my position as registered agreely reflect a change in the registered off all meriting of this change.	reet address of torida limited liab the members of reement of the liab a member a agent and agree and complete p ent as provided lice address, the SECR	he regis bility co the limi mited li JOS e to act erforma for in (crehy co ENNE METARY,	lered office mpany, it is ted liability ability com EPH D'Al in this capance of my a hapter 605, nfirm that it IOSELEY, Al ON BEHALF	and the business of hereby confirmed a company or as of pany. MICO Printed or typed name acity. I further agrituites, and I am fair. F.S. Or, if this different liability	office of that the herwise p	the registered change(s) provided in