

L16000150634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

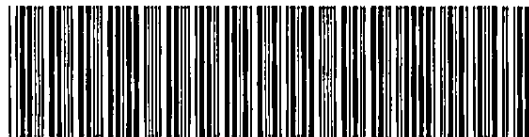
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J. LEGGETT  
JAN 03 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MK REAL ESTATE LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Douglas W. Grissinger

\_\_\_\_\_  
Name of Person

Mellor, Grissinger & Backo LLP

\_\_\_\_\_  
Firm/Company

13801-D Tamiami Trail

\_\_\_\_\_  
Address

North Port, FL 34287

\_\_\_\_\_  
City/State and Zip Code

alexkovtunovich@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas W. Grissinger

941 426-1193

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                             |                                                                                   |                                                                                                  |                                                                                                                            |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

MK REAL ESTATE LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/11/2016 and assigned  
Florida document number L16000150634.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

6860 PRAIRIE JUNCTION TRAIL

(Principal office address MUST BE A STREET ADDRESS)

SARASOTA, FL, 34241

Enter new mailing address, if applicable:

P.O. BOX 7435

(Mailing address MAY BE A POST OFFICE BOX)

NORTH PORT, FL 34290

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Vasily Kuzubov

New Registered Office Address:

9703 Collins Ave, Apt 2508 C

*Enter Florida street address*

Bal Harbour

*City*

Florida 33154

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>                  | <u>Address</u>                | <u>Type of Action</u>                      |
|--------------|------------------------------|-------------------------------|--------------------------------------------|
| MEM          | Michael Kay Management LLC   | 9705 Collins Ave, Apt 1004    | <input type="checkbox"/> Add               |
|              |                              | Bal Harbour, FL 33154         | <input type="checkbox"/> Remove            |
|              |                              |                               | <input checked="" type="checkbox"/> Change |
| MEM          | A & J Home Improvement, Inc. | 8490 W. Price Blvd.           | <input type="checkbox"/> Add               |
|              |                              | North Port, FL 34287          | <input type="checkbox"/> Remove            |
|              |                              |                               | <input checked="" type="checkbox"/> Change |
| AMBR         | Michael Kay Management LLC   | 9703 Collins Ave., Apt 2508 C | <input checked="" type="checkbox"/> Add    |
|              |                              | Bal Harbour, FL 33154         | <input type="checkbox"/> Remove            |
|              |                              |                               | <input type="checkbox"/> Change            |
| AMBR         | A & J Home Improvement, Inc. | 8490 W. Price Blvd.           | <input checked="" type="checkbox"/> Add    |
|              |                              | North Port, FL 34287          | <input type="checkbox"/> Remove            |
|              |                              |                               | <input type="checkbox"/> Change            |
|              |                              |                               | <input type="checkbox"/> Add               |
|              |                              |                               | <input type="checkbox"/> Remove            |
|              |                              |                               | <input type="checkbox"/> Change            |
|              |                              |                               | <input type="checkbox"/> Add               |
|              |                              |                               | <input type="checkbox"/> Remove            |
|              |                              |                               | <input type="checkbox"/> Change            |

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Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 28<sup>th</sup>, 2017

  
Signature of a member or authorized representative

Michael Kay

Typed or printed name of signee