PALM BEACH	GARDENS, FL 33410			
Current Ma	iling Address:			
	Y PARK DR. CH GARDENS, FL 33410 US			
FEI Number: 82-2390828			Certificate of Status Desired: Yes	
Name and A	Address of Current Registered Agent:			
SOLIS, RAFAE	EL E			
389 KÉLSEY P PALM BEACH	PARK DR. GARDENS, FL 33410 US	ninterned office or regio	torad agant or both in the State of Elecide	
389 KÉLSEY P PALM BEACH The above name	PARK DR. GARDENS, FL 33410 US ed entity submits this statement for the purpose of changing its re	gistered office or regis		07/2010
389 KÉLSEY P PALM BEACH The above name	PARK DR. GARDENS, FL 33410 US	gistered office or regis		07/2019 Date
389 KÉLSEY P PALM BEACH The above name SIGNATURI	PARK DR. GARDENS, FL 33410 US ed entity submits this statement for the purpose of changing its re E: SOLIS RAFAEL	egistered office or regis		
389 KÉLSEY P PALM BEACH The above name SIGNATURI	PARK DR. GARDENS, FL 33410 US ad entity submits this statement for the purpose of changing its re E: SOLIS RAFAEL Electronic Signature of Registered Agent	egistered office or regis		
389 KÉLSEY P PALM BEACH The above name SIGNATURI Authorized	PARK DR. GARDENS, FL 33410 US ad entity submits this statement for the purpose of changing its re E: SOLIS RAFAEL Electronic Signature of Registered Agent Person(s) Detail :		02/	
389 KÉLSEY P PALM BEACH The above name SIGNATURI Authorized Title	PARK DR. GARDENS, FL 33410 US ad entity submits this statement for the purpose of changing its re E: SOLIS RAFAEL Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	02/	

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: RAFAEL SOLIS

PRESIDENT

02/07/2019

Electronic Signature of Signing Authorized Person(s) Detail

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000165513

Entity Name: CK MY NEST, LLC

Current Principal Place of Business:

389 KELSEY PARK DR

FILED Feb 07, 2019 **Secretary of State** 4266500003CR

Date