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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LOS00009175F MAY 05 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MKR VENTURES, 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:

KEVIN C. COOLEN
Name of Person

MKR VENTURES, LLC dba The Ups Store
Firm/Company

21301 S. TAMiami TrL. STE 320 PMB 116
Address

ESTERO, FL 33928
City/State and Zip Code

store3404@theupsstore.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEVIN C. COOLEN at (239) 948-1900
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

MKR VENTURES, 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 August 18, 2005 and assigned Florida document number L05000081758

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:

(Principal office address MUST BE A STREET ADDRESS)

21301 S. TAMiami Trl. Ste 320 PMB 116
ESTERO, FL 33928

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

THE UPS STORE
21301 S. TAMiami Trl Ste 320 PMB 116
ESTERO, FL 33928

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:

HENRY C. COHEN

New Registered Office Address:

9110 STRADA PLACE MERCATO STE 6200

Enter Florida street address

NAPLES

, Florida

City

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>
<u>MGR</u>	<u>KEVIN C. COOLEN</u>	<u>9415 LABIANCO ST</u>	<input type="checkbox"/> Add
		<u>FORT MYERS, FL 33967</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>AMBR</u>	<u>RICHARD B. COOLEN</u>	<u>4753 ESTERO BLVD</u>	<input type="checkbox"/> Add
		<u>APT 1103</u>	<input type="checkbox"/> Remove
		<u>FORT MYERS BEACH, FL</u>	<input checked="" type="checkbox"/> Change
		<u>33931</u>	
<u>AMBR</u>	<u>BARBARA A. COOLEN</u>	<u>4753 ESTERO BLVD</u>	<input checked="" type="checkbox"/> Add
		<u>APT 1103</u>	<input type="checkbox"/> Remove
		<u>FORT MYERS BEACH, FL</u>	<input type="checkbox"/> Change
		<u>33931</u>	
			<input type="checkbox"/> Add
			<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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: 4/28/15 (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

April 28, 2015

2015
R. B. Cook

Signature of a member or authorized representative of a member

RICHARD B. COOLEN

Typed or printed name of signee

11 MAY - 1 PM 3:53