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(Re	equestor's Name))
(Ac	ldress)	
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; PICK-UP	☐ WAIT	MAIL
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S. HAWKES

MAR 1 0 2009

EXAMINER

ARTICLE I - Name	
The name of the Limited Liability Compa	ny Is
The traine of the Enrited Liability Compan	
MK 111 LLC	<u> </u>
(must end with the words "Limited	Liability Liability Company, "L,L,C, or LLC")
ARTCLE 11 -Address:	
	the principal office of the Limited Liability Company is:
The maining address and street address or	the philospar office of the cithiled clability Company is .
Principal Office Address:	Mailing Address:
3035 N.W. 90TH ST.	6858 NW 75TH ST
MEDLEY FL 33166	MEDLEY FL 33166
<u> </u>	
APTICLE 444 Pagistared Agent Digist	prod Office 2 Degistered Ament''s Signature.
	ered Office, & Registered Agent"s Signature;
The Limited Liability Company Cannot serve a	s its registeredagent. You must designate as
The Limited Liability Company Cannot serve a	s its registeredagent. You must designate as
The Limited Liability Company Cannot serve and individual or another business entity with an	s its registeredagent. You must designate as n active Florida registration.)
The Limited Liability Company Cannot serve a ndividual or another business entity with are five name and the Florida street address o	s its registeredagent. You must designate as n active Florida registration.)
The Limited Liability Company Cannot serve and individual or another business entity with an The name and the Florida street address o	s its registeredagent. You must designate as n active Florida registration.)
The Limited Liability Company Cannot serve a ndividual or another business entity with are five name and the Florida street address o	s its registeredagent. You must designate as n active Florida registration.)
The Limited Liability Company Cannot serve as ndividual or another business entity with an The name and the Florida street address o NEVILLLE ANDERSON Name	s its registeredagent. You must designate as n active Florida registration.)
The Limited Liability Company Cannot serve as ndividual or another business entity with an The name and the Florida street address o NEVILLLE ANDERSON Name 8035 N.W. 90TH ST.	s its registeredagent. You must designate as a ctive Florida registration.) f the registered agnet are:
The Limited Liability Company Cannot serve a ndividual or another business entity with an The name and the Florida street address o NEVILLLE ANDERSON Name 8035 N.W. 90TH ST. Florida street adress (P.O. Box	s its registeredagent. You must designate as a ctive Florida registration.) f the registered agnet are:
The Limited Liability Company Cannot serve as ndividual or another business entity with an The name and the Florida street address o NEVILLLE ANDERSON Name 8035 N.W. 90TH ST.	s its registeredagent. You must designate as a active Florida registration.) f the registered agnet are: NOT acceptable)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I herby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating 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 608. F.S.

Rregistered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

Name and Address:	
MICHEAL G KEENER 8035 N.W. 90TH ST. MEDLEY FL 33166	3 3
	55.6
	5 5
than the date of filing:	.(OPTIONAL)
	MICHEAL G KEENER 8035 N.W. 90TH ST.

(In accordance with section 608(3), Florida Statuted, the excution of this document constitutes an affirmation under the the penalties of perjury of perjury that the facts stated herein are true

Signature of a member or an authorized representative of a member.