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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: AKCM Properties, 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:

Maura McCarthy Bulman

Name of Person

Maura McCarthy Bulman, P.L.

Firm/Company

4700 Sheridan Street, Ste. J

Address

Hollywood, FL 33021

City/State and Zip Code

maura@maurabulmanlaw.com

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

For further information concerning this matter, please call:

Maura McCarthy Bulman

Name of Person

at (954)

312-3787

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	AK Capital Management, LLC D/B/A AKCM, LLC	1200 Middle River Drive Fort Lauderdale, FL 33304	☐ Add ☒ Remove
MGRM	AK Capital Management, LLC	1200 Middle River Drive Fort Lauderdale, FL 33304	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated

SEP 14/12

Signature of a member or authorized representative of a member

Arun Kaul, Manager & Member, AK Capital Management, LLC

Typed or printed name of signee