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PICK-UP	WAIT	MAIL
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## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MRKAYE REN	ACTY LLC imited Liability Company	
Dear Sir or Madam:	, , , , , , , , , , , , , , , , , , , ,	
	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
RICHARD KAWAS Name of Person	<del></del>	
Alliance TRANSFE		
140 584 St, Linit	20 ALLAHASSEE	
BROOKLYN NY // City/State and Zip Code	1220 PR 6:55	
PKAWAS C AUIAWCZ  E-mail address: (to be used for future annual report no	TRANSFER. Com	
For further information concerning this matter	er, please call:	
Rich Kawas Name of Person	at (646) 28-8863  Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	g amount:	
<b>☑</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

both, in the Blate of Florida.	
1. Name of the limited liability company: MRKAY	E REALTY, LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 140 58th ST 
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	140 58 STREET Unit 20 B200kgn, NY. 11-20
3/8/2013	<u> </u>
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	. 1 2
Registered Agent:	CORPORATION SERVICE CO.
Registered Office Address:	1201 HAYS ST TALLAHASSE, FL 3230
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	EW Registered Office address: RICHARD KAWAS
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	131 SW 47 TERRACE  APT 201 CAPE CORAL ,FL 33904
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote of wise provided in the articles of organization or
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 605, F.S. Or, if this document is being filed to address I hereby confirm that the limited liability compositions of the confirmation of the confir	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.
Signostra Registered Agent	
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314

**FILING FEE: \$25.00** 

INHS18 (12/13)