

2/3 000041360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

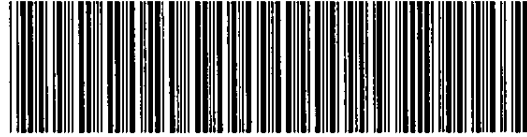
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KILLAMASSEE COUNTY

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: **Mag & Sok 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:

**Maxence Magnou**

Name of Person

**Mag & Sok LLC**

Firm/Company

**9737 NW 41st St Ste 142**

Address

**Doral , Florida 33178**

City/State and Zip Code

**maxmagnou1@hotmail.com**

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

For further information concerning this matter, please call:

**Michael Woods**

Name of Person

at **(561) 586-0090**

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

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TALLAHASSEE, FLORIDA

**Mag & Sok LLC**

Page 1 of 3

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	Ravy Truchot	430 Monserrate St	<input checked="" type="checkbox"/> Add
		Coral Gables, FL 33146	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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CLERK OF DISTRICT COURT  
JULIA M. ASKE-FLORES

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

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Dated July 19, 2013

Signature of a member or authorized representative of a member

Maxence Magnou

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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U.S. DEPARTMENT OF JUSTICE

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