1500002972

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	Mait	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800297675818

04/10/17--01009--011 **25.00



S Warren

APR 1 2 2017

COVER LETTER

Division of Corporations
SUBJECT: MKC PROPERTY SOLUTIONS 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:
JOE INGLESTON Name of Person
MKG PROPERTY SOLUTIONS LLC Firm/Company
3051 Short Leaf Ln.
City/State and Zip Code) City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: 813 455 5202 5.5. TOE INGLESTON at 843 702 4185 J. I
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \Bigcup \\$55.00 Filing Fee & \Bigcup \\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$\Bigcup \\$25.00 Filing Fee & \Bigcup \\$60.00 Filing Fee, Certified Copy (cadditional 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

MKG PROPERTY	SOLUTIONS LLC v as it now appears on our records.) ability Company)
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) ibility Company)
The Articles of Organization for this Limited Liability Company w	vere filed on $O/Oc/2015$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
The new name must be distinguishable and contain the words "Limited Liability	y 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)	
•	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3051 Short Leaf La Wisley Chapel FL 33541
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
Name of New Registered Agent:	JOE INGLESTON
New Registered Office Address: 305 1	Short Leaf La. Enter Florida street address
Wester	ey Chapel, Florida 3354 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as public filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and Lam familiar with and rovided for in Chapter 605, F.S.Or, if this document is

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> **Name Address Type of Action** Sharen Smolinski ☐ Change ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add Remove Remove ſ

□ Change

f am	ending any other information, enter change(s) here: (Attach additional sheets, i	if necessary.)	
-			
-			
-			
-		······································	
			- · · · · · · · · · · · · · · · · · · ·
			
-			
		·	
		····	···
	•		
-			
f an cf	ive date, if other than the date of filing: Sective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day. If the date inserted in this block does not meet the applicable statutory filing requirement	(optional) ys after filing.) Pursuant t	o 605.020 e listed a
	nent's effective date on the Department of State's records.	,	
	cord specifies a delayed effective date, but not an effective time, at 12 goth day after the record is filed.	$2:01$ a.m. on the ϵ	arlier
ated	13/16, 2017.	,	
			الم
	Signature of a member or authorized representative of a member	32	
	Juseph E Ingleston Typed or printed name of signee		
	i ypeg or printed name of signee	-m ♥	
		27 °	

Filing Fee: \$25.00