## L15000207248

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: MKM SARASOTA LLC Name of Corporation		
DOCUMENT NUMBER: L15000207248		
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Julie Nightingale		
Name of Contact Person		
MKM Sarasota LLC		
Firm/Company	<del></del>	
2363 Industrial Blvd		
Address		
Sarasota, FL34234		
City/State and Zip Code		
julie@mkmsarasota.com		
E-mail address: (to be used for future annual	l report notification)	
For further information concerning this matter, p	please call:	
Julie Nightingale	at (9413580383) Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the	Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statute n organized under the laws of the State of <mark>Florida</mark> r registered agent, or both, in the State of Florida		
1. The name of	the corporation: MKM SARASOT	'A LLC		
	office address: 2363 INDUSTRIA			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 12/15/2016	Document number: L15000207248		
	I street address of the current regi- rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	Wright Accounting Inc			
	1226 N Tamiami Trail, Ste 200	 ناریــــــــــــــــــــــــــــــــــــ	202	
	Sarasota FL34236	ZALL ZALL	2023 AUG -7	ا ا ا
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	; -7 PH 3: 46	
	J Nightingale	E ST	نب	U
	2363 Industrial Blvd	AIE	94	
	Sarasota, FL34234	P.O. Box NOT acceptable		
as changed will	be identical.	e street address of the business office of its regis		agent,
Such change wauthorized by t	as authorized by resolution duly ne board, or the corporation has l	adopted by its board of directors or by an office been notified in writing of the change.	т so	
	Mare.	J Nightingale		
Signatu	re of an officer or director	Printed or typed name and title		
I further agrée of my duties, ar document is be	the appointment as registered a to comply with the provisions of ad I am familiar with and accept ing filed merely to reflect a chan s been notified in writing of this	gent and agree to act in this capacity. all statutes relative to the proper and complete the obligation of my position as registered ager ge in the registered office address, I hereby con change.	perfor it. Or, firm th	mance if this at the
7	Ince.	August 8 2023		
Sig	Acture of Registered Agent	Date		
If signing on be	half of an entity:			
MKM Sarasota I	.LC			
T.	yped or Printed Name	_		

\* \* \* FILING FEE: \$35.00 \* \* \*