

L16000779AS

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

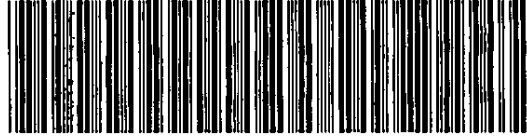
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 MAY 10 P 2:40

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MAY 11 2016

S. WARREN

OBJECT LEGAL INCORPORATED  
5850 GRANITE PARKWAY, SUITE 215  
PLANO TX 75024  
TEL: 844-386-0178  
FAX: 214-317-4754  
EMAIL: zoe@legalinc.com

**DOCUMENT FILING REQUEST LETTER**

Date Mailed: 5/6/2016

From: Zoe Dickson

Registration Section  
Division of Corporations  
P.O. Box 6327 Clifton Building  
Tallahassee, FL 32314

Company name: MarckET LLC

Please file and return one plain copy of the amendment below

Thank you,  
Zoe Dickson  
Legalinc Corporate Services Inc.

**\*\*Please Fax/Email a copy of the filed documents upon acceptance of filing, if you have any questions on the filing please call me or email me at the number and email listed above\*\***

**PLEASE RETURN FILED DOUCMENTS TO :  
OBJECT LEGAL INCORPORATED  
5850 GRANITE PARKWAY, SUITE 215  
PLANO TX 75024**

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MarckET 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:

Nancy Luna

\_\_\_\_\_  
Name of Person

Rocket Lawyer

\_\_\_\_\_  
Firm/Company

5850 Granite Parkway, Suite 215

\_\_\_\_\_  
Address

Plano, TX 75024

\_\_\_\_\_  
City/State and Zip Code

Admin@ictaxadvisors.com

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

For further information concerning this matter, please call:

Nancy Luna

818 967-1467  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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 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> | <u>Name</u>       | <u>Address</u>      | <u>Type of Action</u>                      |
|--------------|-------------------|---------------------|--|
| AMBR         | ANDREW J DELSCAMP | 206 S. MATANZAS AVE | <input type="checkbox"/> Add               |
|              |                   | TAMPA, FL 33609     | <input type="checkbox"/> Remove            |
|              |                   |                     | <input checked="" type="checkbox"/> Change |
|              |                   |                     | <input type="checkbox"/> Add               |
|              |                   |                     | <input type="checkbox"/> Remove            |
|              |                   |                     | <input type="checkbox"/> Change            |
|              |                   |                     | <input type="checkbox"/> Add               |
|              |                   |                     | <input type="checkbox"/> Remove            |
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated May 5, 2016

Nicholas P Marck

Signature of a member or authorized representative of a member:

NICHOLAS P MARCK

Typed or printed name of signee

Page 3 of 3

**Filing Fee: \$25.00**

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2015 MAY 10 P 2:40  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA