Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

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Email Address:\_\_

## FLORIDA LIMITED LIABILITY CO. THE MARK 2904, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

C RICO AUG 12 2019

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THE MARK 2904, LLC	
(Must contain the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")
E II - Address: ng address and street address of the principal office	of the Limited Liability Company is:
Ti Carlant Office Addison	Mailing Address:
Principal Office Address:	maine Addies.
2000 S DIXIE HIGHWAY	SAME AS PRINCIPAL OFFICE

The name and the Florida street address of the registered agent are:

CONTADURIA VI	DAL	
	Name	
2000 S DIXIE HIGH	HWAY - SUITE 205	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
МІАМІ	FL	33133
Cíty	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 615, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

<u> Title:</u>		Name and Address:
	uthorized Member	
$MGR^n = Mt$		
MGRM		RICHARD LEE
		2000 S DIXIE HIGHWAY, SUITE 205
		MIAMI, FLORIDA 33133
V: Effective date is	isted, the date must be specific	ting:, (OPTIONAL)  and cannot be more than five business days prior to or 90  the applicable statutory filing requirements, this date will not
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