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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

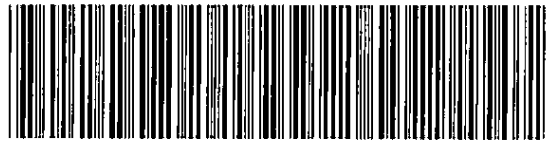
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/14/24--01004--018 **25.00

24 AUG 14 2:10:01

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MILA HOME LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Murat Akkemik
Name of Person
Akkemik Consultancy LLC
Firm/Company
7901 4th ST N STE 7800
Address
St. Petersburg, FL 33702
City/State and Zip Code
Murat@akkemik.net
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Murat Akkemik
Name of Person
315 6645545
at () Daytime Telephone Number
Area Code

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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

24 JUL 2014 11:00:01

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>
MNG	Sina YENEL	1 Horizon Road Apt.1006	<input checked="" type="checkbox"/> Add
		Fort Lee, NJ 07024-6516 USA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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