

L240000104503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

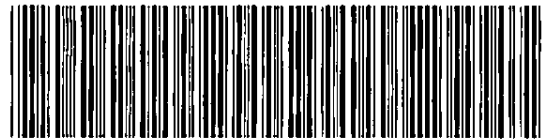
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 APR 18 PM 5:02
FBI, ALA
19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M & M's Mini Farm 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:

Marko Kolaric

Name of Person

Firm Company

9159 S Suncrest Ter

Address

Homosassa, Florida, 34446

City/State and Zip Code

MNMMiniFarm@gmail.com

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

For further information concerning this matter, please call:

Marko Kolaric

Name of Person

at (352) 679-6845

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 Address:

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

M & M's Mini Farm LLC

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	Milena Jones	9159 S Suncoast Ter	<input type="checkbox"/> Add
		Homosassa, FL 34446	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

André Kauf Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00