L24000156649

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COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor			
CHD IE		ATIONS, LLC		
SUBJEC	-1; <u> </u>	Name of Lim	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
		ondence concerning this matter		
		Koren Lee		
		_	Name of Person	
		MKR Creations, LLC		
			Firm/Company	
		2331 Andros Ave		
			Address	
		Fot Myers, Fl 33905		
			City/State and Zip Code	
		MKRCreations@outlook.co		
		E-mail address: (to be used for future annual report noti	ification)
For furth	er information c	concerning this matter, please c	all:	
Koren La	ee		239 330-5424	
	Name o	of Person	at () Area Code Daytim	ne Telephone Number
Enclosed	l is a check for t	he following amount:		
	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		Street Address: Registration Se	ection
	Division of C		Division of Con	
	P.O. Box 632		The Centre of T	Fallahassee

ι,

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MKR CREATIONS LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 4/2/2024	and assigned
Florida document number L24000156649		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	<u>-</u>	
		<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	. .
	, Flori	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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>	Type of Action
MGR	Koren E Lee	2331 Andros Ave	= Add
		Fort Myers, Fl 33905	□Remove
			□Add
			□ Remove
			Change
			□Remove
			☐ Change
		-	
		<u> </u>	□Remove
			□Change
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document's effective					
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e record specifies a d rd is filed.	lelayed effective date, but	not an effective tin	ne, at 12:01 a.m. on th	e earlier of: (b) Th	e 90th day after the
e record specifies a d rd is filed.	X MM	- · 2024	_ ·)		e 90th day after the
e record specifies a d rd is filed.	X MM	- · 2024	ne, at 12:01 a.m. on the		e 90th day after the