## FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham



**APPROVED** 

1997			2 1	Secretary of State DIVISION OF CORPORATIONS			97 MAR 26 AM 10: 50				
						T OF STATE	SECRETARY OF STATE TALLAHASSEE, FLORIDA				
MARCO ASSOCIATES, L.C. 326 ARTHUR DRIVE SARASOTA FIL 34236  Habove mailing address is incorrect in any way, tine through incorrect information and enter correction in Block 2a.							1a. Principal Place of Business Address  326 ARTHUR DRIVE SARASOTA FL 34236				
				Mailing Address				3. Date Organized or Qualified 3a. State of Formation			
Suite, Apt. #, etc.			Suite,	Suite, Apt. #, etc.			06/09/19 4. FEI Number				
City & State			City &	City & State			65-0413296 Not Applic			ol Applicable	
Zip	Country		Zip	Zip Cou		ry	5. Date of Last Report 03/18/1996		6. Certificate of Status Desired S8 /a Additional Fee Required		
7. Name and Address of Current Registe				red Agent			8. Name and Add		egistered Agent	stered Agent	
Street Address (P.O. Box Number is Not Acceptable)  SARASOTA FL 34236  Suite, Apt. #, etc03/28/3701085- ****203.75 ****  City Zip Code  FL  9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited flability company submits this statement for the purpose its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the as registered agent, and accept the obligations.  SIGNATURE  [Registered Agent Accepting Appointment] (NOTE: Registered Agent signature required when reinstating)										of changing appointment	
10. Title Managing Members/Managers				Business Street Address				City.	, State and Zip Code		
MGR MGR	KALIN,	EDWARD L	J	5252 S	S. TA	MIAMI TR	AIL	SARASOI SARASOI	ra fl		
									I further certify that the		

limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER