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2001 UNIFU	KW ROZINEZZ KEŁOKI (ORK)
DOCUMENT #  1. Entity Name	L9900006982

MR INTERNATIONAL ENTERPRISES GROUP, LLC

Principal Place of Business

Mailing Address

4012 YARDLEY AVENUE NORTH ST. PETERSBURG FL 33713-3351

4012 YARDLEY AVENUE NORTH ST. PETERSBURG FL 33713-3351

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

01 SEP 27 PM 4: 09



Suite, Apt. #, etc. Suite, Apt. #, etc					DO NOT WRITE IN THIS SPACE				
City & State City &		City & State	ity & State		4. FEI Number 59-3604239		Applied For		
		<u> </u>		33 3007233		Not Applicable			
Zip	Country	Zip -	- Cou	ntry · · · ·	5. Certificate of Sta	atus Desired 🗀		5.00-Additional se Required	
6. N	ame and Address of Curren	Registered Agent			7. Name and Address of New Registered Agent				
Di IGIECKI	DIRECT MADEL			Name Street Address (P.O. Box Number is Not Acceptable)					
rusiecki, marek 4012 yardley avenue, north St.Petersburg Fl. 33713									
				City			FL	Zip Code	
8. The above named of	entity submits this statement f	or the purpose of changing	g its register	red office or registe	ered agent, or both, in	the State of Florida.			

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FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State

	4		Due By September 26, 2001		*****50.00	.*****5U.UU <sub>≫</sub>	
	9. MANAGING MEMBERS/MANAGERS			10.	ADDITIONS/CHANGES		
•	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Rusiecki, Marek 4012 Yardley Avenue North St. Petersburg Fl 33713-3351	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
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CHECK HERE	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	Change	☐ Addition
STAPLE	NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS CITY ST. 719		☐ Change	☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

DISALLAMTURRUSTEUKIED MALEK. 09-20.01. 727 410 8316.