<b>≈2000 UNIFORM B</b>	0009021	4.2.2	AND	
DOCUMENT#	\$ <del>.</del>		FILED	
1. Entity NameARKUS, LLC		₹* - <del>4</del> *	CO MAY 12 PM 1: 19	
akus, ddc			·	
Principal Place of Business	Mailing Address		SECRETARY OF STATE THAT AHASSEE, FLORIDA	
Principal Place of Business  1381 GULF OF MEXICO DRIVE  SUITE 607  LONGBOAT IXEY, F/ 34228			MEL MINOGERI EGMEN	
LONGBOAT MEY,	, 11 34228		•	
2. Principal Place of Business	3. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State	City & State			Applied For
Zip Country	Zip	Country	31-1682219 ☐ 5. Certificate of Status Desired ☐ \$5.00 A	Vot Applicable dditional
6. Name and Address of C	Current Registered Agent	<u> </u>	7. Name and Address of New Registered Agent	red
HOWADD T. MA	RKUS MGR	Name		
1281 GULF OF MEX	KICO DRIVE	Street Addres	ss (P.O. Box Number is Not Acceptable)	
_ / 67		_		
LONGBOAT REY	1, FL 3422	City	<b>E</b>	ode
. The above named entity submits this state			<u>FL</u>	
_	enention the purpose of changing i	its registered office of regis	stered agent, or both, in the state of Florida.	
	MADULE MAD	9/1	1/VM By Mery O.	2440
SIGNATURE HOWARD 5. Signature, typed or printed name of register	MARKUS MGR red agent and title if applicable. (NO	OTE: Registered Agent signature requ	J Marker M& Ligaril 15, wared why reinstaling)	2000
SIGNATURE HOWARD 5. Signature, typed or printed name of register		OTE: Redistered Agent signature requirements	ured why reinstating) DATE	2000
SIGNATURE HOWARD 5. Signature, typed or printed name of register	FILE	OTE Registered Agent signature requirements  NOWIII FEE IS \$50.0  Payable to Departments	DATE	2000
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