P03000114698

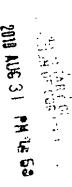
(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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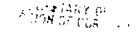
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SEP 0 0 2013

COVER LETTER.

TO: Amendment Section Division of Corporations



2018 AUG 3 | PM % 50

SUBJECT: M & K Unlimited Inc.	
Name of Corporation	
DOCUMENT NUMBER: P03000114698	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fili	ng.
Please return all correspondence concerning this matter to the following:	
Mark Orman	
Name of Contact Person	
M & K Unlimited Inc. dba Mark Orman Construction	
Firm/Company	
653 Tomlinson Terrace	
Address	
Lake Mary, FL 32746	
City/State and Zip Code	
markorman1@gmail.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Mark Orman at (321)945-2500

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Pursuant to the provisions of sections 607.0502. 617.0502, 607.1508, or 617.1508. Florida Statutes, this tatement of change is submitted for a corporation organized under the laws of the State of Floridain order to change its registered office or registered agent, or both, in the State of Florida.	
The name of the corporation: M & K Unlimited Inc.	
The principal office address: 653 Tomlinson Terrace, Lake Mary FL 32746	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/16/03 Document number: P03000114698	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
117 Georgetown Drive	
Suite A	
Casselberry, FL 32707	
Casselberry, FL 32707 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): MARK J. DRMAN 653 Tomlinson Terrace	•
Lake Mary, FL 32746	
P.O. Box. NOT acceptable	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or line corporation has been notified in writing of the change.	
Mark Orman Mark Orman	
Signification effects director the appointment as registered agent and agree to act in this capacity. 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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.	
29 AUG 18	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *