P11000108077

| (R | equestor's Name |) | |
|---|-------------------|--------------|--|
| (A | ddress) | | |
| (A | ddress) | | |
| (C | ity/State/Zip/Pho | ne #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| <u>. (B</u> | usiness Entity Na | ame) | |
| · (D | ocument Numbe | r) | |
| Certified Copies | Certificate | es of Status | |
| Special Instructions to Filing Officer: | | | |
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December 6, 2016

GURKAN AKPINAR / M-FACILITY INC. 6965 PIAZZA GRANDE AVE SUITE 201 ORLANDO, FL 32835 US

SUBJECT: M-FACILITY INC. Ref. Number: P11000108077

We have received your document for M-FACILITY INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 116A00025829

Carolyn Lewis
Regulatory Specialist II

COVER LETTER

TO: Amendment Section Division of Corporations

M-FACILITY INC
Name of Corporation P11000108077

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Gurkan Akpinar

M-Facility Inc 6965 Pinzza Grande Ave # 2

pinar a gaok invest, com all address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida. | | |
|--|---------------|-----------------|
| 1. The name of the corporation: M-FACILITY INC. | | |
| 2. The principal office address: 6965 Piazza Grande Ave # 201 | | |
| Orlando, F. + 32835 | | |
| 3. The mailing address (if different): | | · |
| 4. Date of incorporation/qualification: 12/12/20/1 Document number: P1100010807 | 7 | |
| 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) | | |
| Yagız Okatar | | |
| 1466 E. Michigan St | 20 | 37 |
| Orlando, F.J. 32806 | 16 DEC | ASION SELECT |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | 15 #H | TARY OF |
| Gurkan Akpinar | بن | CKA |
| 6965 Piazza Grande Ave #201 | 37 | 2.7 2. |
| Orlando, Fx 32835 | | |
| The street address of its registered office and the street address of the business office of its registered as changed will be identical. | d agent, | |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. | | |
| Surkan Akpinar Preside Printed or typed name anglitte | dens | _ |
| 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 registe agent. Or if this document is being filed merely to reflect a change in the registered office address, hereby confirmation that the corporation has been notified in writing of this change. | ered I | |
| Signature of Registered Agent 12/12/2016 Date | | |
| If signing on behalf of an entity: | | |
| Gurkan Akpinar Typed or Printed Name | | |

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