

P15000040446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

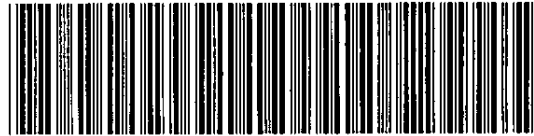
(Business Entity Name)

(Document Number)

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16 JUL 13 AM 8:11
DIVISION OF CORPORATIONS
STATE OF MISSISSIPPI

JUL 20 2016

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MRKT PM, INC.

Name of Corporation

DOCUMENT NUMBER: P15000040446

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:

Alejandro Vilarello, Esq.

Name of Contact Person

Alejandro Vilarello, P.A.

Firm/Company

16400 NW 59 Avenue

Address

Miami Lakes, FL 33014

City/State and Zip Code

AVLaw@Vilarello.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alejandro Vilarello

Name of Contact Person

at (305) 299-5550

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

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
16 JUL 13 AM 8:41

ALEJANDRO VILARELLO, PA
16400 NW 59th Avenue, Second Floor
Miami Lakes, Florida 33014

July 11, 2016

RECEIVED
DIVISION OF CORPORATIONS
16 JUL 13 AM 8:41

Via FedEx

Florida Department of State
Division of Corporations
Attn: Gary Blankenbaker
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

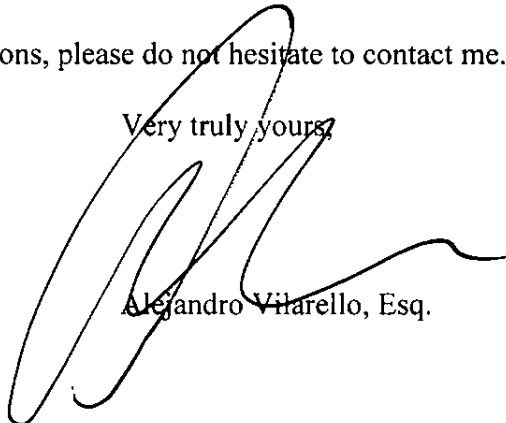
Re: MRKT PM, Inc.
Ref. Number: P15000040446

Dear Mr. Blankenbaker:

In response to your letter reference the above, enclosed please find a copy of your letter the completed application and the \$35.00 filing fee to assist you in expediting our request.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,


Alejandro Vilarello, Esq.

Enclosures

AV/cm

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, this 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: MRKT PM, Inc.
2. The principal office address: 16400 NW 59 Avenue, 2nd Floor
Miami Lakes, FL 33014
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/30/15 Document number: P15000040446
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)

Alejandro Vilarello PA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Alejandro Vilarello, Esq.

16400 NW 59 Avenue, 2nd Floor

P.O. Box NOT acceptable

Miami Lakes, FL 33014

16 JUL 13 PM 8:11
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

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 the corporation has been notified in writing of the change.

Jason Ellison
Signature of an officer or director

Jason Ellison, President

Printed or typed name and title

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.

[Signature]
Signature of Registered Agent

07/11/16

Date

If signing on behalf of an entity:

Alejandro Vilarello, Esq.

Typed or Printed Name

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