that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATEL, BIPINKUMAR

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: SUMMERFIELD QWIK KING FOOD STORE, LLC **Current Principal Place of Business:**

DOCUMENT# L07000114376

16481 S US HIGHWAY 301 SUMMERFIELD. FL 34491

Current Mailing Address:

616 SE 47TH LOOP OCALA, FL 34480 US

FEI Number: 26-1480139

Name and Address of Current Registered Agent:

PATEL, BIPINKUMAR 616 SE 47TH LOOP OCALA, FL 34480 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BIPINKUMAR PATEL

Electronic Signature of Registered Agent

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

Title	MGRM
Name	MILKYFE LLC
Address	616 SE 47TH LOOP
City-State-Zip:	OCALA FL 34480

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and

Date

03/03/2025

Certificate of Status Desired: No

FILED Mar 03, 2025 Secretary of State 6651441938CC

Date

03/03/2025

MGRM