2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2019
Secretary of State
0813819521CC

DOCUMENT# L16000056507

Entity Name: MAYURI K LLC

Current Principal Place of Business:

4 NEW WARRINGTON RD
PENSACOLA, FL 32506

Current Mailing Address:

1260 HERON LAKES CIRCLE
MOBILE, AL 36693

FEI Number: 81-1931470

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHULTZ, KERRY ANNE
2045 FOUNTAIN PROFESSIONAL COURT
SUITE A
NAVARRE, FL 32566 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: KERRY ANNE SCHULTZ 03/20/2019

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGER	Title	AUTHORIZED MEMBER
Name	PATEL, KALPESH	Name	PATEL, MAYURI
Address	1260 HERON LAKES CIRCLE	Address	1260 HERON LAKES CIRCLE
City-State-Zip:	MOBILE AL 36693	City-State-Zip:	MOBILE AL 36693
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	PATEL, BHAVESH R	Name	AMIN, SHILPABEN S
Address	3661 AIRPORT BLVD. #186	Address	ONE EAST I-65 SERVICE ROAD SOUTH
City-State-Zip:	MOBILE AL 36608	City-State-Zip:	MOBILE AL 36607
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	PATEL, BINTA H	Name	PATEL, HEMANG R
Address	ONE EAST I-65 SERVICE ROAD SOUTH	Address	3661 AIRPORT BLVD. #186
City-State-Zip:	MOBILE AL 36607	City-State-Zip:	MOBILE AL 36608

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

SIGNATURE: KALPESH PATEL MEMBER 03/20/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date