

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000168514

Entity Name: KARMARKE, LLC**Current Principal Place of Business:**7325 N FERNANDINA AVE
DUNNELLO, FL 34433**Current Mailing Address:**P.O. BOX 640284
BEVERLY HILLS, FL 34464 US**FEI Number:** 81-3855761**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILSON, MARK LEE
7325 N FERNANDINA AVE
DUNNELLO, FL 34433 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:** MARK LEE WILSON

02/06/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name WILSON, MARK LEE
Address 7325 N FERNANDINA AVE
City-State-Zip: DUNNELLO FL 34433

Title MGR
Name WILSON, KAREN LYNN
Address 7325 N FERNANDINA AVE
City-State-Zip: DUNNELLO FL 34433

Title AMBR
Name WILSON, MARK LEE
Address 7325 N FERNANDINA AVE
City-State-Zip: DUNNELLO FL 34433

Title AMBR
Name WILSON, KAREN LYNN
Address 7325 N FERNANDINA AVE
City-State-Zip: DUNNELLO FL 34433

Title AMBR
Name ADAMS, KIMBERLY NICHOLE
Address 7325 N FERNANDINA AVE
City-State-Zip: DUNNELLO FL 34433

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: MARK LEE WILSON

MANAGER

02/06/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date