

L21000103018

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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**FLORIDA LIMITED LIABILITY CO.
MAKC HOME, LLC**

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March 11, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

WILLIAM G MORRIS
247 N. COLLIER BLVD
STE 202
MARCO ISLAND, FL 34145US

SUBJECT: MAKC HOME, LLC
REF: W21000032999

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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SHAMIYA M HARRIS
Regulatory Specialist II
New Filings Section

FAX Aud. #: H21000097683
Letter Number: 521A00005133

H21000097683

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: MAK HOME, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM G. MORRIS, ESQ.

Name of Person

LAW OFFICES OF WILLIAM G. MORRIS, P.A.

Firm/Company

247 N. COLLIER BLVD, SUITE 202

Address

MARCO ISLAND, FL 34145

City/State and Zip Code

wgm@wgmorrislaw.com

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

For further information concerning this matter, please call:

William G. Morris

239

642-6020

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MAKC Home, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:25398 Witherspoon St.
Farmington Hills, MI 48335Mailing Address:25398 Witherspoon St.
Farmington Hills, MI 48335

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

WILLIAM G. MORRIS

Name

247 N. COLLIER BLVD., SUITE 202Florida street address (P.O. Box NOT acceptable)

<u>MARCO ISLAND</u>	<u>FLORIDA</u>	<u>34145</u>
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:AMBRAndrew J. Grewe, Trustee of Andrew J. Grewe Revocable
Trust dated April 11, 2000
25398 Witherspoon St., Farmington Hills, MI 48335AMBRJanet M. Grewe, Trustee of Janet M. Grewe Revocable Trust
dated April 11, 2000
25398 Witherspoon St., Farmington Hills, MI 48335

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.**ARTICLE VI:** Other provisions, if any.**ANY AND ALL LAWFUL BUSINESS.****REQUIRED SIGNATURE:**Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.ANDREW J. GREWE, TRUSTEE - Authorized Member
Typed or printed name of signer**Filing Fees:**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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