

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MERRITT HOUSING, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Myra Homer

Name of Person

Capitol Services Registered Agent Department

Firm/Company

800 Brazos, Suite 400

Address

Austin, Texas 78701

City/State and Zip Code

mhomer@capitol-services.com

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

For further information concerning this matter, please call:

Myra Homer

Name of Person

at (800) 345-4647

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

FILED
10 OCT 15 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

