

**B11 000000243**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

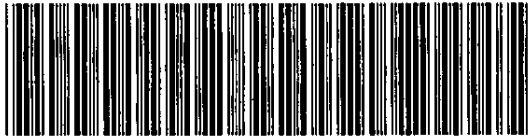
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**FILED**  
2016 MAR 28 P 5:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 29 2016

**S MASON**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 23, 2016

NICOLAS SIHA  
LEGALINC CORPORATE SERVICES INC  
17350 STATE HIGHWAY 249  
HOUSTON, TX 77064

SUBJECT: MMC GROUP, LP  
Ref. Number: B1100000243

We have received your document for MMC GROUP, LP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason  
Regulatory Specialist II

Letter Number: 216A00003730

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MMC Group, LP  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** B11000000243

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

Please return all correspondence concerning this matter to:

Nicolas Siha  
Contact Person  
LegalINC Corporate Services Inc.  
Firm/Company  
17350 State Highway 249  
Address  
Houston, TX 77064  
City, State and Zip Code  
support@legalinc.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicolas Siha at (713) 478-1040  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. MMC Group, LP  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 12/06/2011 3. B11000000243  
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

USA-RA LLC  
Name  
841 Prudential Dr., 12<sup>th</sup> Floor  
Address  
Jacksonville, FL 32207  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Legalinc Corporate Services Inc.  
Name  
5237 Summerlin Commons, Suite 400  
Florida street address (P.O. Box not acceptable)  
Fort Myers FL 33907  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Mich [Signature]  
Signature of General Partner

*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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Mich [Signature]  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

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