

## Florida Department of State

Division of Corporations Public Access System

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## REGISTERED AGENT CHANGE

## **MEYER-MARKELSON-YOUNG, LLC**

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Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	eyer-Markelson-Young, LLC
2. (a) Principal office address of limited liability compan	y: 767 Fifth Avenue
(Note: MUST BE STREET ADDRESS)	18th Floor New York, NY 10153
(b) Mailing address of limited liability company:	767 Fifth Avenue
(Note: MAY BE POST OFFICE BOX)	18th Floor New York, NY 10153
5/30/2003	L03000019539
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	
Registered Agent:	NRAI Services, Inc.
Registered Office Address:	Weston, FL 33331
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	United Corporate Services, Ing A
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9200 South Dadeland BlvdSuite 508
	Miami ,FL 33156
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company.  Signature of a member or authorized yepresentative of a member	Torida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization
Anthony E. Meyer, Member	
Printed or typed name of signee	<del>_</del>
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	ngree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in crely reflect a change in the registered office y has been notified in writing of this change.
Signature of Registered Agent Michael A Barr Preside	
Signature of Registered Agent Michael A. Barr, President	ienic

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00