## L04 000 032 175

(Requestor's Name)				
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	/Cross/7:= (Db	45		
(City	/State/Zip/Phone	<del>#</del> )		
PICK-UP	MAIT	MAIL		
- (Bus	iness Entity Name	<u>a)</u>		
(300	mess Emily Marin	-,		
(Doc	cument Number)			
Certified Copies	Certificates of	of Status		
Consideration to 5				
Special Instructions to Filing Officer.				
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## COVER LETTER

	Registration Section Division of Corporations			
SUBJE	Minnicar Holdings, LLC			
Name of Limited Liability Company				
Dear Sir	or Madam:			
The enc	losed Registered Agent/Registered (	Office Change and f	ee(s) are submitted for filing.	
Please re	eturn all correspondence concerning	this matter to the fo	ollowing:	
Edward	O. Minnicar			
	Name of Person		_	
Minnica	r Holdings, LLC			
	Firm/Company		_	
1601 He	atherstone Drive			
	Address		_	
Frederic	ksburg, VA 22407			
	City/State and Zip Code		_	
	nn@silverco.com			
E-	mail address: (to be used for future a	innual report notific	eation)	
For furti	ner information concerning this matt	er, please call:		
Patty Co	su	561 at (	981-5252	
	Name of Person	(	Area Code & Daytime Telephone Number	
	Mailing Address: Registration Section		Street Address: Registration Section	
	Division of Corporations		Division of Corporations	
	P.O. Box 6327		The Centre of Tallahassee	
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enclosed is a check for the followi	ng amount:		
	■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. N:	ame of the limited liability company: Minniear Holdin	gs. LLC		
2. (a)	1601 Heatherstone Drive, Fredericksburg, VA 22407	(b)		
z. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	04/07/2006	Loa	4000032175	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	CORPORATION SERVICE COMPANY			
(a)	Registered Agent and Registered Office shown on the records of	the Florida Dep	pt. of State	
	Registered Office Address <u>(MUST BE FLORIDA STREET</u>	ADDRESS)		
	1201 HAYS STREET			
	TALLAHASSEE	32301-2525		
	, 11	<u> </u>	<del></del>	
(b)			·	
(-/	Enter name of NEW Registered Agent and/or NEW Registere	d Office addres	<u>18</u> :	
	Edward O. Minnicar, Jr.			
	NEW Registered Office Address		<del></del>	
	1001 E Telecom Drive			
	Boca Raton	L 33431 _		
		L	<u>-</u>	
	limited liability company is not organized under the la			
change	e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li	e registered o	office and the business office of the registered	
was/w	ere authorized by an affirmative vote of the members	of the limited	I liability company or as otherwise provided in	
the arti	icles of organization or the operating agreement of the		, and the second se	
Signal	ature of a member or authorized representative of a member	EOU	VARD Oo MINNIEAR Printed or typed name of signee	
	by accept the appointment as registered agent and ag	ree to act in t		
provisi	ions of all statutes relative to the proper and complete	r performance	e of my duties, and Lam familiar with and accent	
to mer	ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change	hereby confi	rm that the limited liability company has been	
6	Aug In			
Signati	ire of Registered Agent			

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