Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC REGISTERED AGENT CHANGE MERZAL INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Merzal Investmen		
Name	of Limited Lia	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and	fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the f	following:
Zachary Ysais		
Name of Person		
Registered Agent Solutions, Inc.		
Firm/Company		
1701 Directors Blvd, Suite 300		
Address		
Austin, TX 78744		
City/State and Zip Code		
E-mail address: (to be used for future annu	al report notifi	ication)
For further information concerning this matter, p	olease call:	
Zachary Ysais	888 at (705-7274
Name of Person	- \-	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314
Enclosed is a check for the following a	amount:	

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

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.

r ioriuu.	Rannolle	avaata	anto !	1.0			
1. Name	of the limited liability company: Merzal Ir	ivesin	ienis, L				
2. (a) 21	205 YACHT CLUB DRIVE, SUITE #21	.08	b)	YACHT CL	UB DRIVE, SUITE #2108		
, -	Principal office address of limited liability company:			•	Mailing address of limited liability company:		
(Note: MUST BE STREET ADDRESS)			(<u>Note: MAY BE POST OFFICE BOX)</u> AVENTURA, FL 33180				
	VENTURA, FL 33180		AVEN	410100,	1 L 33100		
1(0/17/2007		L0700	010609	6		
3.	Date of filing/registration in Florida	4.		Document	number		
5. (a) La	ahaie, Peter						
$\frac{2}{Re}$	gistered Agent and Registered Office shown on the records 1205 NE 37 Ave gistered Office Address (MUST BE FLORIDA STREE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
3	Suite 2108						
Α	ventura	_{FL} 331	80		2021 2021		
(b) R	egistered Agent Solutions, Inc.			_	FILED 2021 DEC -6 PF SELLAHASSEF		
Ent	ter name of NEW Registered Agent and/or NEW Register	red Office :	ddress:		FILED 2-6 F ASSEF		
1	55 Office Plaza Dr.				PH 1: 02 PH 1: 02 F. FLORID		
	EW Registered Office Address:				A16 A16		
S	Suite A				77		
T	allahassee	_{FL} 323	01	_			
the change agent will was/were a	ted liability company is not organized under the or changes are made, the Florida street address be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members of organization or the operating agreement of t	of the reg Hiability rs of the li	gistered offi- company, it mited liabil	ce and the build is hereby country transfer it.	isiness office of the registere nfirmed that the change(s)		
	cedes Lahaie	M	ercedes L		Manager		
•	of a member or authorized representative of a member			•	rped name of signee		
provisions the obligat to merely t	iccept the appointment as registered agent and a s of all statutes relative to the proper and comple tions of my position as registered agent as provi reflect a change in the registered office address, writing of this change.	ete pertor.	nance of m	e duties, and	A am familiar with and accet		

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

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent