## L07000115279

(Requestor's Name)				
(Addre	ess)			
(Address)				
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/City/C	State /Zin/Dhans	. 40		
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Special Instructions to Fili	ng Officer:			

Office Use Only



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SECRETARY OF STATE
AND AMASSEE, FLORIDA

## **COVER LETTER**

Division of Corporations		
SUBJECT:	MGM Logistics LLC	
	f 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 concernin	g this matter to the following:	
Joy Schroeder		
Name of Person		
NRAI Corporate Services, I	LC	
Firm/Company		
1021 Main Street, Suite 11	50	
Address		
Houston, TX 77002		
City/State and Zip Code		
mgreenberg@mercuria.co	m	
E-mail address: (to be used for future annual report	notification)	
For further information concerning this mat	tter, please call:	
Joy Schroeder	at ( 800 ) 862-5438	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
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 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.

	1. Name of the limited liability company:	MGM Logistics LLC			
	2. (a) Principal office address of limited liability company:				
	(Note: MUST BE STREET ADDRESS)	501 Brickell Key Dr., Suite Miami, FL 33131	501		
	(b) Mailing address of limited liability company:				
	(Note: MAY BE POST OFFICE BOX)				
	11/14/2007	L07000115279	9		
	3. Date of filing/registration in Florida	4. Document number			
	5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept	of States		
	Registered Agent:	Enrique J. Martin	<u> </u>		
	Registered Office Address:	c/o Greenberg Traurig 1221 Brickell Ave. Miami, FL 33131	FILE NASSEE		
		Mighin, FE 33 (3)	75 =		
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	INTE ORID		
	NEW Registered Agent:	NRAI Services, Inc.			
	<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue			
		Tallahassee	,FL <u>32301</u>		
•	If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company  Signature of a member of authorized representative of a member  Mark Greenberg	laws of the State of Florida, it i lorida street address of the regi ical. Or, in the case of a Florid was/were authorized by an aff wise provided in the articles of	s hereby stered office la limited irmative vote organization		
	Printed or typed name of signee	-			
by:	I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the property of the property		urther agree to c of my duties, ovided for in istered office t this change.		

FILING FEE: \$25.00