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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: June 21, 2019

Order#: 816491/010

Re: MINNIEAR ENTERPRISES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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 ENT	ERPRISE	ES, LLC
2. (a)	1001 E. TELECOM DRIVE	(b)	1001 E. TELECOM DRIVE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	BOCA RATON, FL 33431		BOCA RATON, FL 33431
	10/11/2013	. —	L09000005508
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	HRIC, MICHAEL		
. ,	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of State:
	1800 SECOND STREET		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	
	SUITE 901		M 25 M & 10
	SARASOTA .FL	34236	
(p)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Of 1201 Hays Street NEW Registered Office Address:	Office addr	'en:
	Tallahassee FI.	32301	
the cha agent v was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the registe bility con f the limit	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
	Michael Hric	Micha	nel Hric. Manager
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the ohi to merc notifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change. The of Registered Agent Corporation Scrvice Company	performar l for in Ch ereby con	ice of my duties, and I am familiar with and accept apper 605 F.S. Or if this document is being filed

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