L09000106894

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FILING CANCELLED RETURNED CHECK

S. HAWKES

APR 2 0 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Mist Holdings, LLC			
Name of 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 concerning this matter to the following:			
Ramsey Gouda Name of Person			
Name of Leison			
Mist Holdings, LLC			
Firm/Company			
330 E Central Blvd			
Address			
Orlando, FL 32801			
City/State and Zip Code			
mh@gadusa.com			
mb@ged-usa.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
. C. Latitude and an action of the control of the c			
Ramsey Gouda at (407) 493-2695			
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 32314			
Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 Filing Fee \$\infty\$ \$55 Filing Fee & Certified Copy			

FILING CANCELLED RETURNED CHECK

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

Pursuant to the provisions of sections 608.416 or 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	8, Florida Statutes, the undersity to change its registered office of	med limited registered
1. Name of the limited liability company:	Mist Holdings, LLC	19 K
2. (a) Principal office address of limited liability company	: 330 E Central E	3lvd 🚣
(Note: MUST BE STREET ADDRESS)	Orlando, FL 32801	2 P
(b) Mailing address of limited liability company:	330 E Central Blvd	·
(Note: MAY BE POST OFFICE BOX)	Orlando, FL 32801	
November 5, 2009	L09000106894	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of	State:
Registered Agent:	Cohen & Grigsby, PC	
Registered Office Address:	27200 Riverview Center Blvd ste 309 Bonita Springs, FL 34134	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> <u>NEW Registered Office Address:</u>	V Registered Office address: Ramsey Gouda 330 E Central Blvd	
(MUST BE FLORIDA STREET ADDRESS)		00004
	,	.32801
If the limited liability company is not organized under the leant that after the charge or changes are made, the Fl and the business office of the registered agent will be identiliability 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 or authorized representative of a member	orida street address of the register cal. Or, in the case of a Florida li was/were authorized by an affirm wise provided in the articles of org	ed office mited native vote
Parasan Canda		
Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608/F,S. Or, if this document is being filed to men address, Thereby confirm that the limited liability company	gree to act in this capacity. I furth per and complete performance of sition as registered agent as provi ely reflect a change in the registe has been notified in writing of th	her agree to my duties, ded for in red office is change.

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