(Requestor's Name)	
(Address)	
(Address)	000333102440
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	03/15/19-~ 1
rtified Copies Certificates of Status	S≣ 20
Special Instructions to Filing Officer:	ALLAHAS

#### **COVER LETTER**

TO: Registration Section Division of Corporations

GERMER 7214, LLC SUBJECT:

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:

KEVIN E. RIGGS

Name of Person

# RENAISSANCE CONSULTING AND DEVELOPMENT

Firm/Company

## 5331 PRIMROSE LAKE CIR, STE 228

Address

TAMPA, FL 33647

City/State and Zip Code

## KEVIN@RENCD.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEVIN E. RIGGS	813 435-5585
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:

**2** \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

## 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.

Na	me of the limited liability company:	MER 7214, LLC		
(a)	5418 W INGRAHAM ST	<sub>(b)</sub> 5418 W	INGRAHAM ST	
,	Principal office address of limited liability of (Note: MUST BE STREET ADDRES	ompany: N	(b)	
	TAMPA, FL 33616	TAMPA.	FL 33616	
	08/26/2010	L1000009	90026	
	Date of filing/registration in Florid	ia 4.	Document number	
(a)	RENAISSANCE CONSULTING AN	D DEVELOPMENT, LLC		
	Registered Agent and Registered Office shown on th KEVIN E. RIGGS			
	Registered Office Address (MUST BE FLORID	<u>A STREET ADDRESS)</u>		
	ТАМРА	, <sub>FL</sub> 33647	SECUE TALLA	
(b)	RENAISSANCE CONSULTING AN		HA 5	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	<u> Registered Office address</u> :		
	KEVIN E. RIGGS			
	<u>NEW</u> Registered Office Address:		r	
	5331 PRIMROSE LAKE CIR, STE	228		
	ТАМРА	. FL_33647		
cha ent w s/we	mited liability company is not organized ur nge or changes are made, the Florida street vill be identical. Or, in the case of a Florida re authorized by an affirmative vote of the cles of organization or the operating agreen	address of the registered office i limited liability company, it is members of the limited liability	and the business office of the register shereby confirmed that the change(s) company or as otherwise provided in	
	Stante Into		TO , MANAGER	
iignat	ure of a member or sumorized representative of a me	mber	Printed or typed name of signee	

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed to merely reflect/a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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