

L11000018350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

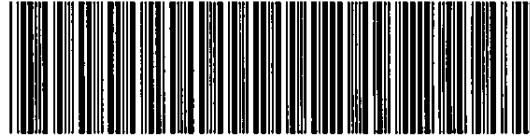
(Business Entity Name)

(Document Number)

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EXAMINER



**CAPITOL  
SERVICES**

**Statement of Change of Registered Office  
or Registered Agent or Both for Limited  
Liability Company**

**Capitol Corporate Services, Inc.**  
PO Box 1831  
Austin, TX 78767  
Phone: 800-345-4647 Fax: 800-432-3622  
regagent@capitolservices.com

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

DATE: 2/24/2014  
STATE: FLORIDA  
REP UNIT: MC DADE GP, LLC

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for the above referenced name, which is to be filed in your office. Enclosed is check #24787 in the amount of \$25.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

Should you need to return this document for any reason please send it to:

Capitol Corporate Services, Inc.  
PO Box 1831  
Austin, TX 78767

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TALLAHASSEE, FL  
CLERK OF THE COURT

Capitol Corporate Services, Inc.  
Registered Agent Services



13-32307C

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

Pursuant to the provisions of sections 605.0114, 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: MC DADE GP, LLC
2. (a) Principal office address of limited liability company: 8214 Westchester Drive Suite 550  
(Note: MUST BE STREET ADDRESS) Dallas, TX 75225
- (b) Mailing address of limited liability company: 8214 Westchester Drive Suite 550  
(Note: MAY BE POST OFFICE BOX) Dallas, TX 75225
- 2/11/2011 L11000018350
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 State:
- Registered Agent: Agent Resigned
- Registered Office Address: FL
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
- NEW Registered Agent: Capitol Corporate Services, Inc.
- NEW Registered Office Address: 155 Office Plaza Dr Ste A  
(MUST BE FLORIDA STREET ADDRESS) Tallahassee FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

D. M. M. M.  
Signature of a member or authorized representative of a member

DOUGLAS M. MARMON  
Printed or typed name of signer

I hereby 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.

Jason Fischer  
Signature of Registered Agent

Jason Fischer, Assistant Secretary on  
behalf of Capitol Corporate Services, Inc.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00