

11/8/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
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From:

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Account Number : FCA000000023
Phone : (514)280-3338
Fax Number : (954)288-0845

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**LLC REGISTERED AGENT CHANGE
MYRRH HOLDINGS LLC**

Certificate of Status	0
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T. L. LAUGHREY

FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Kimberly Laughrey
DATE	2019-11-08 14:36:15 CST
RE	12393156 - MYRRH HOLDINGS LLC

COVER MESSAGE

Robert Sholl
Fulfillment Associate
Global Fulfillment Operations
CT Corporation

Team 614-280-3338
GlobalFulfillmentTeam@wolterskluwer.com



1200 Orange Street Wilmington, DE 19801
www.wolterskluwer.com

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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. Name of the limited liability company Myrrh Holdings, LLC

2. (a) Principal office address of limited liability company (b) same
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

200 SOUTH BISCAYNE BLVD 16th Floor

Miami, FL 33133

05/11/2011

111000037123

3. Date of filing registration in Florida 4. Document number

5. (a) BRANT, BARRY M
Registered Agent and Registered Office shown in the records of the Florida Dept. of State
200 SOUTH BISCAYNE BLVD 16th Floor
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Miami, FL 33133

C T Corporation System

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Office Address

1700 South Pine Island Road

Plantation, FL 33324

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.

Mark Richford
Signature of a member or authorized representative of a member
Mark Richford

ETHRONS FAMILY TRUST COMPANY
Printed or typed name of agent

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.

By Lisa Dubois Lisa Dubois, Asst. Secretary
Signature of Registered Agent

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