Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000080454 3)))



H220000804543ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

_			
- 1	\sim	٠	
- 1	v		

Division of Corporations

Fax Number : (850)617-6383

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	 	_	
			-	

LLC REGISTERED AGENT CHANGE MELDO LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAR - 3 2022

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

	me of the limited liability company: MELDO	LLC	
(a)	7901 4th St N	(b)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STE 300		12 lotissement les balcons de la save
	St. Petersburg FL 33702		montaigut sur save Occitanie 31530
	06/21/11	L	.11000071809
	Date of filing/registration in Florida	4.	Document number
(a)	Sandrine Simonneau		
(/	Registered Agent and Registered Office shown on the records without France	of the Florida E	Dept, of State:
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	<u> </u>
	MIAMI	_{FL} 33131	2 mm - 2 m
(b)	Northwest Registered Agent		
(b)	Northwest Registered Agent Enter name of NEW Registered Agent and/or NEW Registered		TESS:
(b)			2 PH 4: 43
(b)	7901 4th St N NEW Registered Agent and/or NEW Registered NEW Registered Office Address:		
(b)	Enter name of NEW Registered Agent and/or NEW Register 7901 4th St N		PH 4: 43

Morgan Noble

Signature of a mem g or authorized representative of a member

Printed or typed name of signee

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 writing of this change.

Tom Glover - Assistant Secretary

Signature of Registered Agent