# 13000030819

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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SEONE DARY COLLAGE

RECEIVED

#### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

#### **ORDER FORM**

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, Ft. 32303

corphelp@dos.myflorida.com 850-245-6051 FROM Melissa Stops mstops@incserv.com 850.656,7953

REQUEST DATE 5/14/2020

PRIORITY Routine

OUR:REF # (Order ID#) | 826304

ORDER ENTITY
MEGLEY MARINE, LLC

## PLEASE PERFORM THE FOLLOWING SERVICES: MEGLEY MARINE, LLC (FL)

File the attached change of agent document

NOTES:

\$25.00 Authorized - Please honor the original submission date as the file date. Email address for annual report reminders: jay.shang@usa-cgrporate.com

### RETURN/FORWARDING INSTRUCTIONS

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Singerely,

Please bill us for your services and be aure to include our reference number on the invoice and courier nackage if epplicable. For USC orders, please include the time date on the results.

Manday, May 18, 2020 Page I of I

## 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. N	ame of the limited liability company: MEGLEY MARI	INE, LL	.C				
2. (a)			(b) _				
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>	` / —	Mailing address of limited (Note: MAY BE POS	_	-	-
	3756 FRANKLIN AVE		37	756 FRANKLIN AVE			
	SEAFORD, NY 11783		SI	EAFORD, NY 11783			
	02/28/2013		L13	3000030819			
3.	Date of filing/registration in Florida	<b>-</b> 4.		Document number			
5. (a)							
J. (G,	Registered Agent and Registered Office shown on the records of UNITED STATES CORPORATION AGENTS, INC.	the Flori	ida De	pt. of State:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>SS)</u>	<del></del>	<i>≥ (</i> 5.	202	
	5575 S. SEMORAN BLVD SUITE 36				ات الحر	2020 MAY	٠.
	ORLANDO , FI	32822		<del></del>	LTAR	₩	ſ
(b)					77 (	EK C	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office	<u>addres</u>	<u>35</u> :	2	<del></del>	
	Incorporating Services Ltd.					-	
	NEW Registered Office Address:						
	1540 Glenway Drive			- <del></del>			
	TALLAHASSEE, FI	L					
chang agent was/w the ar	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of the forganization or the operating agreement of the	e registe ability of the li- limited	ered o comp imited d liab	office and the business office any, it is hereby confirmed to a liability company or as other ility company.  Y STOVALL	of the range of the control of the c	register change	ed (s)
•	ature of a member or authorized representative of a member			Printed or typed name of	-	, .	
provis the ob to me notifie	eby accept the appointment as registered agent and agesions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I led in writing of this change.	ree to a perfor d for it hereby	ict in manc n Cha confi	this capacity. I further agree e of my duties, and I am fam pter 605, F.S. Or, if this doc rm that the limited liability o	e to con iliar wii zument i zompany	iply with and e is being y has b	th the accept g filed een
Signal	Tre of Registered Agent						

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