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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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\ <u>.</u>	Office Use On	lv



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SECRETARY OF STATE

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T. CARTER

UC RAPRO Charge

COVER LETTER

Division of Corporations		
MP & LP Holdings LLC		
	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Michael Payten		
Name of Person		
MP & LP Holdings LLC		
Firm/Company		
301 S. Federal Highway		
Address		
Boca Raton, FL 33432		
City/State and Zip Code		
admin@thebocaratonflorist.com		
E-mail address: (to be used for future annual re	eport notification)	
For further information concerning this matter, pleas	se call:	
Michael Payten		
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amo	unt:	
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	
INUC18 (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.

1. Na	ame of the limited liability company: MP & LP Hold	dings LLC			
	,	(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)		
	301 S. Federal Highway				
	Boca Raton, FL 33432				
	04/03/2014	L14	4000055060	,	
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Weintraub, Peter B				
). (a)	Registered Agent and Registered Office shown on the records of	the Florida Der	ot. of State:		į st.
				7	TAL 38
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		8	CRE
	2700 N Military Trail Suite 355	<u> </u>		OCT 27	S.Z.T
	Boca Raton	33431		7 PM	RY OF
(b)	Payten, Michael Enter name of NEW Registered Agent and/or NEW Registered	Office address	<u>s</u> :	4: 05	ORIDA
	NEW Registered Office Address:				
	301 S. Federal Highway				
	Boca Raton , FL	33432			
the cha	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members coles of organization or the operating agreement of the	ws of the Sta the registere ability comp	ed office and the business office any, it is hereby confirmed that	ce of the	registered
	L. R.	Michae	el Payten		
-	ture of a member or authorized representative of a member	•	Printed or typed name of s	-	
provisi he obl to mere	by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I did not in writing of this change.	ree to act in i performance d for in Cha hereby confi	this capacity. I further agree t e of my duties, and I am famili oter 605, F.S. Or, if this docu rm that the limited liability coi	to compl ar with a ment is b mpany h	y with the and accept eing filed as been
Cionom	ro of Pagistarad Agent				