

7/31/23, 10:55 AM

Division of Corporations

# LIS 00000615

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.

(((H23000265271 3)))



H230002652713ABC

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

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : TRIPP SCOTT, P.A.  
Account Number : 075350000065  
Phone : (954)525-7500  
Fax Number : (954)761-8475

**\*\*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 MDA HOSPITALITY SOLUTIONS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

**RECEIVED**

2023 JUL 31 PM 3:21

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2023 JUL 31 PM 1:46

APPROVED  
AND  
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 01 2023  
K. Brumblay

H23000266271  
H23000262025STATEMENT 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: MDA HOSPITALITY SOLUTIONS, LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

2870 PINE TREE DRIVE #4MIAMI BEACH, FL 33140

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

P.O. Box 3221Windermere, FL 3478601/02/2015L15000000615

3. Date of filing/registration in Florida

4. Document number

5. (a) D'ARGENIS-FERNANDEZ, MARY A

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2870 PINE TREE DRIVE #4MIAMI BEACH, FL 33140

(b) TRIPP SCOTT, PA

Enter name of NEW Registered Agent and/or NEW Registered Office address:

ATTN: MARIANNA SEILER DEJAGER, ESQ.

NEW Registered Office Address:

110 SE 6TH STREET, FIFTEENTH FLOORFORT LAUDERDALE, FL 33301

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.

Marianna Seiler Dejager  
Signature of a member or authorized representative of a member

MARIANNA SEILER DEJAGER, ESQ., AUTHORIZED RE  
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.

Marianna Seiler Dejager  
Signature of Registered Agent

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

APPROVED  
AND  
FILED  
2023 JUL 31 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA