L160000 29544

| | (Requestor's Name) | |
|----------------------|--------------------------|----------|
| | (Address) | |
| | (Address) | |
| | (City/State/Zip/Phone #) | |
| PICK-UF | WAIT | MAIL |
| | (Business Entity Name) | |
| | (Document Number) | <u> </u> |
| Certified Copies | Certificates of t | Status |
| Special Instructions | to Filing Officer: | |
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| | | |

Office Use Only



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MAY 16 2016 J SHIVERS



April 27, 2016

JASON WYATT 20840 SAN SIMEON WAY #307 MIAMI, FL 33179

SUBJECT: MGL REAL ESTATE INVESTMENTS LLC

Ref. Number: L16000029544

We have received your document for MGL REAL ESTATE INVESTMENTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 116A00008680

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

Amendment Section

TO:

| Division of Corporations | | |
|---|--|--|
| SUBJECT: MGL Real & State Investments LLC Name of Corporation | | |
| DOCUMENT NUMBER: 16000029544 | | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| Jason P. Wyalt Name of Contact Person | | |
| MCh Real Estate Investments LLC Firm/Company | | |
| 20840 San Simeon Way # 307 | | |
| Miami Fh. 33179 City/State and Zip Code | | |
| Jaywyatt Je Aoh. com | | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| Name of Contact Person Name of Contact Person Area Code & Daytime Telephone Number | | |
| Name of Contact Person Area Code & Daytime Telephone Number | | |
| Enclosed is a \$35.00 check made payable to the Department of State. | | |
| Mailing Address: Amendment Section Amendment Section | | |

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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: MGLReal Estate Investments LLC |
|--|---|
| 2. (a) | Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) Principal office address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | Miami FL. 33179 Miami FL, 33179 |
| 3. | Feb (Lacy 11, 2016 L 60000 29544) Date of filing/registration in Florida 4. Document number |
| 5. (a) | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 5237 Summer Commons Suite 400 |
| | FORT Meyers, FL 33907 |
| (b) | Enter name of NEW Registered Agent and/or NEW Registered Office address: Dason P. Wya H. NEW Registered Office Address: 20840 San Simeon Way \$4307 Miami ,FL 33179 |
| the cha agent v was/we the arti | imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in itself of organization or the operating agreement of the limited liability company. The printed or typed name of signed by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the |
| provifi the obl to mer notified | tons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been a limited liability company has been a limited liability company has been are of Registered Agent |
| | Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 |

FILING FEE: \$25.00

INHS18 (2/14)