## 114000062502

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

Office Use Only



700299926937

2017 JUN -8 AM 8: 38

J. HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Thone. Usu 330 1300					
ACCOUNT NO. : 12000000195					
REFERENCE : 674757 4369509					
AUTHORIZATION Spelle Man					
COST LIMIT : \$ 25.00					
ORDER DATE : June 8, 2017					
ORDER TIME : 12:04 PM					
ORDER NO. : 674757-010					
CUSTOMER NO: 4369509					
CHANGE OF AGENT					
NAME: MYM TECHNOLOGY & SERVICES, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Melissa Zender EXT#					

EXAMINER:

## COVER LETTER

TO:

Registration Section

Divi	sion of Corporations				
SUBJECT:	MYM TECHNOLOGY & SERVICES, LLC				
SOBJECT.	Name of Limited Liability Company				
Dear Sir or N	∕ladam:				
The enclosed	Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.			
Please return	all correspondence concerning this ma	atter to the following:			
	Jane Jusino				
	Name of Person				
	Express Scripts Holding	g Company			
	Firm/Company				
	One Express Way				
	Address				
	St. Louis, MO 63121				
	City/State and Zip Code				
	gmdreher@express-scripts.c				
E-mail a	address: (to be used for future annual r	eport notification)			
For further in	formation concerning this matter, plea	se call:			
	. at				
	Name of Person	Area Code & Daytime Telephone Number			
STR	EET/COURIER ADDRESS:	MAILING ADDRESS:			
	stration Section	Registration Section			
	ion of Corporations	Division of Corporations			
	on Building	P.O. Box 6327			
	Executive Center Circle hassee, Florida 32301	Tallahassee, Florida 32314			
Encl	osed is a check for the following amo	ount:			
□ \$2	5 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18 (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	une of the limited liability company: MYM TECHN	OLOGY 8	SERVICES	3, LLC		
2. (a)	3111 W. DR. Martin Luther King JR. BLVD  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  SUITE 800 TAMPA, FL 33607	(		W. DR. Martin Luther King JR. BLVD  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  800 TAMPA, FL 33607		
3. 5. (a)	03/30/2016  Date of filing/registration in Florida  CARDY, THOMAS W  Registered Agent and Registered Office shown on the records of	4:	L1600006	Document num	ıber	
	3111 W. DR. MARTIN LUTHER KING JR. BLVD Registered Office Address (MUST BE FLORIDA STREET SUITE 800 TAMPA , F	<i>L</i> 33607			SECRETAL SECRETAL	
(b) _	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered  1201 Hays Street				-8 AM 8: 39 ARY OF STATE SSEE FLORIDA	
	NEW Registered Office Address:					
	Tallahassee , F	L <u>32301</u>				
he char gent w vas/wei	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members less of organization or the operating agreement of the	of the regis iability co of the lim	stered office impany, it is ited liability	and the busines hereby confirm company or as pany.	ss office of the registered ned that the change(s)	
Signati	ue of a member or authorized representative of a member			Printed or typed na	ame of signee	
l hereb rovisio he oblig o merel	y accept the appointment as registered agent and agents of all statutes relative to the proper and complete eations of my fosition as registered agent as providly reflect a change in the registered office address, I inviting of this change.	gree to act e performa ed for in C hereby co	in this capa ince of my d hapter 605, infirm that t	city. I further a luties, and I am j F.S. Or, if this he limited liabil	ngree to comply with the familiar with and accept document is being filed ity company has been	
	10		Lydia Co	ohe <b>n</b>		
Signature	of Registered Agent Corporation Service Company	BY:	Asst. Vice P			
•	Division of Computations P.O.	Dov 6327	• Tollohnes	on 121 3031.d		