L17000036963

(Requ	estor's Name)	
(Addre	ess)	
(Addre) (a)	
(Addie	:55)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
0		
(Busin	ess Entity Nan	ne)
(Docu	ment Number)	· · ·
Certified Copies	Certificates	of Status
Special Instructions to Fili	ing Officer:	
		1

Office Use Only



600297898506

04/14/17--01034--014 **60.00

TALLAHASSEE, FLORIDE

S Warren APR 1 7 2017

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MRG OFFICE HOLONGS, LLC Name of Limited Liability Company	
raine of Emilieu Elability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Roy MILDAFA Name of Person	
Name of Person	
MILDARL & ASSOLIATES, PA Firm/Company	
Firm/Company	
423 DELAWARE AVE Address	
Address	
IT PIERCE FLA 34950	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
RUY MIL DOVER at (772) ZIL - 794 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee Certificate of Status □ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate of Status □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

mrg offic	e Hold	NGS LLC			
(<u>Name of the Limited L</u> (A F	<u>iability Compar</u> Torida Limited L	ny as it now appears on liability Company)	1 our records.)		
The Articles of Organization for this Limited Liabil		were filed on 2	115/17	and assi	gned
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liabi	lity company here:			
MA					
The new name must be distinguishable and contain the words	"Limited Liabili	ity Company," the desig	nation "LLC" or the	abbrasiation "LL	.C."
Enter new principal offices address, if applicable):		VIA	CRE A	·
(Principal office address MUST BE A STREET A	DDRESS)			TAR ASS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>xo</u>	~	14	PH 2: 40, OF STATE EE. FLORIDA	<u>ה</u>
B. If amending the registered agent and/or registered agent and/or the new registered office			ır records, <u>ente</u> ı	r the name o	f the new
Name of New Registered Agent:	ROY	T MILDAG	3N_	·	
New Registered Office Address:	423	DELAWARE Enter Florida			
	FT PIE		, Florida	34950	
-	<u>,</u>	City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	MICHAEL OHLE	423 DELAMANE AVE	Add
		FT PIERCE FLA 34950	☐ Remove
			Change
MGR	ROY MILDNER	423 DELAWARE AVE	X Add
		F PIFRCE FL 349 ID	☐ Remove
			□ Change
MLR	FRANCES BLAKE	1575 4841 AVE	
		VERN BEACH FL 34960	Remove
			Change
			□ Add
			Remove
			Change
		<u> </u>	□ Add
		ACUA ACUA	Remove
		LAHASSEE. FI	hange
		F.F. 0	
		Dr.	□ Remove
			_□ Change

		•						
<u></u>			·					
			100 100 1					
						····		
							•	
ective date	e, if other than the	e date of filir	ng:	to date of filing or	(0]	ptional) ofter filing) Pur	rsuant to 605 0	207 (3)
te: If the da	ate inserted in this because the later on the I	olock does not	meet the applic	able statutory fili	ng requirements,	this date will	not be listed	as the
		•						
				t an effective	time, at 12:0	1 a.m. on	the earlier	of:
record spe	ecifies a delaye	cord is filed						-
record spe	ecifies a delaye day after the re	cord is filed	•					
record spo		cord is filed	, 2017	<u></u> .		SEC	171	*·
record spo	lay after the re	cord is filed	0 . 5			SECRET/ TALLAHA	F APR	
cument's effe	lay after the re		, 2017	orized representativ	ve of a member	SECRETARY TALLAHASSE	FILEC	

Page 3 of 3

Filing Fee: \$25.00