## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:		
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	Fax Number : (850) 517-6383	-
From:		
	Account Name : LEGALZOOM.COM INC.	
	Account Number : 120010000062	٠.
	Phone : (323) 962-8600	
	Fax Number : (323) 962-3889	

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address:	I. CLINE	-
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## LLC REGISTERED AGENT CHANGE MEILLIER LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

## EXAMINER

RECEIVED SEP 2 5 2018

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## 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 ogent, or both, in the State of Florida.

I. N	une of the limited liability company: MEILLIER LLC	C				
2. (a)	5342 Clark Road, Suite #1063	(b) 5342 CI	ark Road, Suite #	1063		
2. ( <del>2</del> ,	Principal office arkbress of lemmed liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POST	lizbility e		<del>-</del>
	Sarasota, FL 34233	Saraso	ta, FL 34233	<del> </del>		
	01/31/2018	L180000	28261			~_
3.	Date of filing/registration in Florida	4.	Document number		N.O	
5. (a)	Jameson Vicars		_		<u> </u>	
(-2	Registered Agent and Registered Office shown on the records of the 100 Wailace Avenue, Suite #380	ie Florida Dept. of Stat	c·	ન <sup>તે</sup> ક્ર	SEP	
	Registered Office Address	ODRESSI	-	. 3	(2)	
	Sarasota, FL 34237		_	ŵ	<u> </u>	
	, FI		••	10 p. at.	ယ္	•
(ե)	UNITED STATES CORPORATION AGENTS				05	
(,,)	Finer name of NEW Registered Agest and/or NEW Registered (	Mice address	······································			
	13302 WINDING OAK COURT, SUITE A					
	NEW Registered Office Address:		-			
	TAMPA FI.	33612	 -			
the ch agent was/w	limited liability company is not organized under the law singe or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of itseles of organization or the operating agreement of the limited.	the registered offic bility company, it i f the limited liabilit limited liability cor	e and the business of is hereby confirmed to ty company or as other apany,	tice of th hat the c	ie registe hange(s)	red
<u></u> -	aftire of a member by authorized representative of a member	Andrew Meil	HGF Printed or typed name of	of signed		•
I here provis the ob- to men notifie	by accept the appointment as registered agent and agre- tions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change, CHEYENNE MCKELEY, ASSISTANT SECRETARY STATES CORPORATION AGENTS, INC.		•		ply with : n and acc being fi has beer	the Sept led 1

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

(NHS18 (2/14)