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Electronic Filing Menu

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.

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To:			
	Division of Corporations		625 ~
	Fax Number : (850)617-6383		SSC 617 1217
From:			. <i>'U'</i> स्रो
	Account Name : REGISTERED AGEN	NT SOLUTIONS INC	لنا <u>ب-</u> جا
	Account Number : I20100000062 Phone : (888)705-7274		•
	Fax Number : (888)706-7274		
, , , , , , , , , , , , , , , , , , ,	mail Address:	FNT CHANGE	
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Help

## **COVER LETTER**

TO: Regist

Registration Section Division of Corporations

SUBJECT: MILE HIGH OF SAVANNAH LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vanessa Castillo	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One, 5301 Southwes	st Pkwy. Ste 400
Address	
Austin, TX 78735	
City/State and Zip Code	
E-mail address: (to be used for future and For further information concerning this matter.  Vanessa Castillo	please call: 888 705-7274
Name of Person	at () Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	amount:
□ \$25 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. Name of the limited liability company: M	ILE HIGH OF SAVANNAH LLC	
<sub>2. (a)</sub> 813 South Gardner S	reet (b) PO Box 26767	
Principal office address of limited liability (Note: MUST BE STREET ADDR	company: Mailing address of limited liability company:	:
Scottsburg, IN 47170		<del></del>
A		
5/23/2018	L18000129098	
<ol> <li>Date of filing/registration in Flo</li> </ol>	rida 4. Document number	
5. (a) Blumberg Excelsior C	orporate Services	
Registered Agent and Registered Office shown or 155 Office Plaza Dr	the records of the Florida Dept. of State:	
Registered Office Address (MUST BE FLOR	DA STREET ADDRESS)	
Tallahassee	32301 ⇔	
(b) Registered Agent Sol	utions, Inc.  W Registered Office address:	المراسم
Enter name of NEW Registered Agent and/or NI	W Registered Office address:	<u>"                                    </u>
155 Office Plaza Dr.		77
NEW Registered Office Address: Suite A	PH 7:34  OF STATE SEE, FL	J
Tallahassee	FL 32301	
If the limited liability company is not arganized	major the laws of the State of Florida, it is hereby confirmed that after	.,,,

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.

## /s/ JENNIFER DODD

JENNIFER DODD Authorized Person

Signature of a member or authorized representative of a member

Printed or typed name of signee

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. Thereby confirm that the limited liability company has been notified in writing of this change.

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent