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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

: (855)330-1010

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

	Address:			
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## LLC REGISTERED AGENT CHANGE MHK HOLDINGS, LLC

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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 agent, or both, in the State of Florida.

(a) _		_ (	b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	5712 BUSCH DRIVE		PO Box 398805			
	MALIBU, CA 90265		Miami E	Beach, FL 33239		
	07/06/40		1 18000	179828		
	07/26/18	-		Document number		
	Date of filing/registration in Florida	4.		Document number		
(a)	Say Bookkeeping LLC			_		
	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Sta	te:		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRE:	<u>(SS)</u>	- SF 20		
	1815 Purdy Ave		20 F			
	Miami Beach , FI	3313	39	2020 FEB 10 PM 12: 41 SECRETARY OF STATE TALLAHASSEE, FL		
	Registered Agents Inc.			SSS P		
(b)	Enter name of NEW Registered Agent and/or NEW Registered					
	Elliet hand of 11.77 Registrive registriction		<del></del>	F. M. F.		
	7901 4th St N					
	NEW Registered Office Address:					
	STE 300	_				
	St. Petersburg	3370	)2			
ent v ent v	imited liability company is not organized under the la unge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the repair ability of the limited	ne State of Figistered officeompany, it imited liability co	ce and the business office of the register is hereby confirmed that the change(s) ity company or as otherwise provided in		
P:	ture of a member or authorized representative of a member	<u> </u>	iley Park	Printed or typed name of signee		
oigna	by accept the appointment as registered agent and ag			•		
- !	his are not the annihity out as registered agent and an	roo to 1	1 <i>Cl</i> 101 1011C CA	maciiv — i difiner avree io comuniv winci		

Signature of Registered Agent