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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724



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	ame of the limited liability company: ME FORT FAI	RFIELD LLC	
2. (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)
	33 Boston Post Road West, Suite 220	_	_
	MARLBOROUGH, MA 01752		
	3/8/2022	L22000	096326
3. 5. (a)	Date of filing/registration in Florida Comporation Service Company	4.	Document number
()	Registered Agent and Registered Office shown on the records of the Corporation Service Company	ne Florida Dept. of	State:
	Registered Office Address (MUST BE FLORIDA STREET A) 1201 Hays Street	DDRESS)	2023 JU SECRU TALLAH
	Tallahassee FL:	12301-2525	
(b)	Enter name of NEW Registered Agent and/or NEW Registered (Office address:	
	URS AGENTS, LLC		
	NEW Registered Office Address:		
	3458 LAKESHORE DRIVE		
	TALLAHASSEEFL	32312	
signat Signat I herel brovision the oblite	mited liability company is not organized under the lawinge or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited liability reauthorized by an affirmative vote of the members of loss of organization or the operating agreement of the lawy accept the appointment as registered agent and agreems of all statutes relative to the proper and complete grations of my position as registered agent as provided by replaced a change in the registered office address. I he	he registered of pility company. The limited liability in the limited liability in the limited liability in the limited liability in the liabi	The and the business office of the registered it is hereby confirmed that the change(s) oility company or as otherwise provided in company. Printed or a ped name of signee capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed.
ноиµса <>	Georgina Vega, Asst. Secretary		

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

Signature of Registered Agent