

L22000120834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

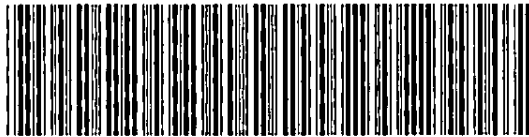
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100383500871

RAERO Change

2022 MAY 27 AM 9:46
FILED
DEPARTMENT OF STATE
COR. MARYLAND ST.
ANNAPOLIS, MD 21403

2022 MAY 27 AM 10:09
RECEIVED
DEPARTMENT OF STATE
ALLAHASSEZ, FILIPIN

A. RAMSEY
MAY 31 2022

CT CORP

**3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724**

Date: 05/27/2022

Acc#120160000072

Eric DW

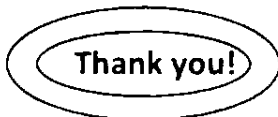
Name:	MGT Intermediate LLC
Document #:	
Order #:	14348450 - 10

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **55.00**



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: MGT INTERMEDIATE, LLC

2. (a) <u>4320 W. KENNEDY BLVD., SUITE 200</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>TAMPA, FL 33609</u>	(b) <u>4320 W. KENNEDY BLVD., SUITE 200</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>TAMPA, FL 33609</u>
---	---

3. <u>03/24/2022</u> Date of filing/registration in Florida	4. <u>L22000120834</u> Document number
--	---

5. (a) TK REGISTERED AGENT, INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
101 E. KENNEDY BLVD, SUITE 2700
TAMPA, FL 33602

FILED
 2022 MAY 27 AM 9:46
 STATE OF FLORIDA
 DEPT. OF REVENUE

(b) C T Corporation System
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
1200 South Pine Island Road
Plantation, FL 33324

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.

<u>/s/ Anthony Trey Traviesa</u> Signature of a member or authorized representative of a member	<u>Anthony Trey Traviesa</u> 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, I hereby confirm that the limited liability company has been notified in writing of this change.

By: C T Corporation System Sandra Zwiack Sandra Zwiack, Assistant Secretary
Signature of Registered Agent