LZZ000 362 471

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone #)			
(Business Entity Name)				
(Do	pcument Number)			
Certified Copies	_ Certificates of Status			
Special Instructions to	Filing Officer:			
	Office Use Only			



86/21/24--01008--012 **25.00

TO: Registration Section Division of Corporations

M&H FLORIDA PROPERTY HOLDINGS, 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:

MUNTASER, MUNTASER

Name of Person

M&H FLORIDA PROPERTY HOLDINGS, LLC

Firm/Company

1100 MEADOW LANE

Address

ORLANDO, FL 32807

City/State and Zip Code

admin@aspflorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ricky Hamed	216	5485800)
Name of Person		Area Code & Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

Enclosed is a check for the following amount:



□ \$55 Filing Fee & Certified Copy



2 100

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	ume of the limited liability company:	M&H FLORIDA PROPERTY HOLDINGS, LLC		
2. (a)	1100 MEADOW LANE	(b)	100 MEADOW LANE	
-/ (4)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	ORLANDO, FL 32807	OF	RLANDO, FL 32807	
	08/17/2022	 L22		
3.	Date of filing/registration in Florida	<u>-</u>	Document number	
5. (a)	MUNTASER MUNTASER			
	Registered Agent and Registered Office shown on the records 1100 MEADOW LANE Registered Office Address (MUST BE FLORIDA STREE		м. of State:	
	ORLANDO	, FL		
(b)	Ricky Hamed			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>			
	1100 MEADOW LANE			
	NEW Registered Office Address:			
	ORLANDO	FL		
:hange igent v vas/we	imited liability company is not organized under the or changes are made, the Florida street address of a vill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member cles of organization or the operating agreement of t	the registered of d liability compa rs of the limited	ffice and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in	
	$(\mathcal{O}(\mathcal{O}))$	Mur	Printed or typed name of signee	
-	ture of a member or authorized representative of a member			
I here provisi	by accept the appointment as registered agent and e ons of all statutes relative to the proper and comple	agree to act in th etc performance	his capacity. I further agree to comply with the of my duties, and Lam Jamiliar with and acc	

Thereby 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 dutics, 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

Signature of Registered Agent

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