	(Requestor's Name)						
	(Address)						
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(Address)							
	(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL					
	(Business Entity Name)						
	(Dusiness Entity Marrie)						
(Document Number)							
Pertified Copies	Certificates of	Status					
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Special Instructions to	Filing Officer:						
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Office Use Only



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A. BUTLER DEC - 5 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195								
REFERENCE : 175997 8176882								
AUTHORIZATION:								
COST LIMIT : \$ 25.00								
ORDER DATE : December 2, 2022								
ORDER TIME : 1:45 PM								
ORDER NO. : 175997-005								
CUSTOMER NO: 8176882								
CHANGE OF AGENT								
CUSTOMER NO: 8176882								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Eyliena Baker EXT#								

EXAMINER:

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: MERIT AUCTIO	NS, LLC					
2. (a)	19595 US HWY 84 E (b) P.O. I			(95			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*		Mailing address of (Note: MAY)		•	• •
	BOSTON, GA 31626		BOSTON	, GA 31626 U	N	,	
	11/21/2022		L22000497	7230			
3.	Date of filing/registration in Florida	4.		Document nu	ımber		_
5. (a)	GROOVER, JAMES M, JR.						
	Registered Agent and Registered Office shown on the records of 2890 INDUSTRIAL PLAZA DRIVE	the Florida	Dept. of State	- ::	- <u> </u>	2022 DI	'n
	Registered Office Address (MUST BE FLORIDA STREET)	4DDRESS	2	-		DEC -2	3] ~
	TALLAHASSEE	32301				AH 11: 02	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	Office add	dress;	-	(1)	2	
	NEW Registered Office Address:			-			
	1201 Hays Street			-			
	Tallahassee .FL	32301					
change agent v was/wo the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the /S/ Matthew Carlton ure of a member or authorized representative of a member	registere ability con of the limi limited li	d office and mpany, it is ited liability ability com	I the business hereby confin company or	office of rmed that as otherw	the reg the cha ise pro	istered ange(s)
provisi the obli to mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete justions of my position as registered agent as provided by reflect a change in the registered office address. I have in writing of this change.	ee to act performa I for in C vereby co	in this capa nce of my a hapter 605, nfirm that t	ocity. I furthen luties, and I a . F.S. Or, if the he limited liat	r agree to m familia his docum bility com	compl r with a ent is b pany h	y with the and accept being filed as been
Signatur	r of Registered Agent	Grace E.	Kirby, Ass	t. Vice Presid	et		

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