## L13000033156

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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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.

I. Na	me of the limited liability company: MFI FLORIDA H	OLDINGS	LLC	
2. (a)	Principal office address of limited liability company.  (Note: MUST BE STREET ADDRESS)	(b)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		_ ·		
			1	12000033156
3. 5. (a)	Date of filing/registration in Florida COGENCY GLOBAL INC.	4.		Document number
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State COGENCY GLOBAL INC.			tate:
	Registered Office Address (MUST BE FLORIDA STREET)  115 N. CALHOUN STREET, SUITE 4	ADDRESS)		
	TALLAHASSEE , FL	32301		2023 NOV 1
(6)	UNIVERSAL REGISTERED AGENTS, INC.  Enter name of NEW Registered Agent and/or NEW Registered			
	UNIVERSAL REGISTERED AGENTS, INC.	Office addi	<u>'ess</u> '	PMI2: 1
	NEW Registered Office Address:			- <b>0</b>
	1317 CALIFORNIA STREET			<u> </u>
	TALLAHASSEE, FL	32304		_
change agent v was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- tere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered bility com f the limit	office a pany, it ed liabil	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in
	/s/tMatt Melnick	Matt N	felnick	
I herel provisi the obli to mere notified	ure of a member or authorized representative of a member on accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the change of this change.	ee to act in performan I for in Ch pereby con	this ca we of m apter 60 firm tha	Printed or typed name of signee spacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
	erah Moore re of Registered Agent			