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5: 17 F. HUNT C. Z/Z8/24 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 336716 8062991

AUTHORIZATION : ,

COST LIMIT : \$ (25)-00

ORDER DATE: February 27, 2024

ORDER TIME : 8:32 AM

ORDER NO. : 336716-005

CUSTOMER NO: 8062991

CHANGE OF AGENT

NAME: MFP CAPITAL LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller -- 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. 3	Name of the limited liability company: MFP CAPITAL	LLC			
2. (a	830-13 A1A NORTH #341	(b	830-13 A	1A NORTH #341	
(Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	('-		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	r:
	PONTE VEDRA BEACH, FL 32082		PONTE \	/EDRA BEACH, FL 32082	
	08/23/2023	_	L2300039	7088	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	a)				
(-	Registered Agent and Registered Office shown on the records of VON DER AHE, PETER	f the Florida	Dept. of Stat	- e:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-	
	830-13 A1A NORTH #341				
	PONTE VEDRA BEACH F	32082	-	- - -	
/1-	N			ಟಿ 	
(b	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> .	d Office ad	dress;		
	Corporation Service Company			ED RESIDENTIALE RESIDENTALE RESIDENTALE	
	NEW Registered Office Address:			32 32	
	1201 Hays Street			_	
	Tallahassee . Fi	32301			
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e registere iability co of the lim	d office and mpany, it is ited liability	d the business office of the registered s hereby confirmed that the change(s y company or as otherwise provided	d ;)
/s/ Peter Von Der Ahe			Peter Von Der Ahe, Authorized Person		
Sigi	nature of a member or authorized representative of a member			Printed or typed name of signee	
provi the or to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to act performed for in C hereby co	in this cape mee of my c hapter 605 infirm that i	acity. I further agree to comply with duties, and I am familiar with and ac . F.S. Or. if this document is being j the limited liability company has bee	the ccept filed rn
Signa	Luce of Registered Agent Grace E. Kirby. Asst. Vice I	President			