

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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LLC REGISTERED AGENT CHANGE
MPC CONCORD, LLC

Certificate of Status	0
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

M. SOLOMON

MAY 13 2024

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: MPC Concord, LLC

2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

189 S. ORANGE AVENUE #1170

ORLANDO, FL 32801

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

189 S. ORANGE AVENUE #1170

ORLANDO, FL 32801

04/05/2024

L24000157417

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
MCCRANEY, STEVEN E

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

189 S. ORANGE AVENUE #1170

ORLANDO, FL 32801

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporate Creations Network Inc.

NEW Registered Office Address:

801 US Highway 1

North Palm Beach, FL 33408

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.

/s/ Tiffany Meeker
Signature of a member or authorized representative of a member

Tiffany Meeker, Special Manager
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.

/s/ Tiffany Meeker Tiffany Meeker, Special Secretary
Signature of Registered Agent

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

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TALLAHASSEE, FL 32314
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