

9/10/24, 6:50 PM

Division of Corporations

Florida Department of State
Division of Corporations
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To:
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Fax Number : (850)617-6383

From:
Account Name : SHUFFIELD LOWMAN
Account Number : I20030000118
Phone : (407)581-9800
Fax Number : (407)581-9801

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: REGISTEREDAGENT-WRL@SHUFFIELDLOWMAN.COM

**LLC REGISTERED AGENT CHANGE
MEAH FREEMAN PROPERTY GROUP LLC**

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M. SOLOMON
SEP 11 2024

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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.*

1. Name of the limited liability company: MEAH FREEMAN PROPERTY GROUP LLC
2. (a) 3670 MAGUIRE BLVD STE 104
Principal office address of limited liability company
(Note: MUST BE STREET ADDRESS)
ORLANDO, FL 32803
- (b) 3670 MAGUIRE BLVD STE 104
Mailing address of limited liability company
(Note: MAY BE POST OFFICE BOX)
ORLANDO, FL 32803
3. 07/09/2024
Date of filing/registration in Florida
4. 1.24000305898
Document number
5. (a) MEAH, SANJAR D
Registered Agent and Registered Office shown on the records of the Florida Dept. of State
3670 MAGUIRE BLVD STE 104
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
ORLANDO, FL 32803
- (b) WILLIAM R. LOWMAN, JR., ESQ.
Enter name of NEW Registered Agent and/or NEW Registered Office address
SHUFFIELD, LOWMAN & WILSON, P.A.
NEW Registered Office Address
1000 LEGION PLACE, STE 1700
ORLANDO, FL 32801

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.

Sanjar Meah
Signature of member or authorized representative of a member

SANJAR D. MEAH
Printed or typed name of signer

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.

Signature of Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FL