

**MD6 000001146**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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Certificates of Status \_\_\_\_\_

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FILED  
2010 APR 19 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**T. CLINE**

APR 20 2010

**EXAMINER**



National Registered Agents, Inc.  
11600 College Boulevard  
Suite 210  
Overland Park, KS 66210  
800.550.6724  
Fax 913.851.0713

April 14, 2010

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Meridian Place Apartments, LLC  
Statement of Change of Registered Office or Registered Agent or Both for Limited  
Liability Company

Dear Sir/Madam,

For the purposes of changing the registered office and registered agent of the above  
captioned Meridian Place Apartments, LLC, please find enclosed, in duplicate, a Statement  
of Change of Registered Office or Registered Agent or Both for Limited Liability Company  
accompanied by our check in the amount of Amount of \$25.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the  
enclosed envelope.

Thank you in advance for your cooperation in this matter.

Sincerely,

Wendi M. Cook  
National Registered Agents, Inc.

Enclosure - Check

2010 APR 19 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Meridian Place Apartments, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matt Thompson

Name of Person

National Registered Agents, Inc.

Firm/Company

11600 College Blvd., Suite 210

Address

Overland Park, KS 66210

City/State and Zip Code

ddishon@gannonintl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matt Thompson

Name of Person

at ( 800 )

550-6724

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED  
2010 APR 19 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, 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: Meridian Place Apartments, LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_

☒

**(Note: MUST BE STREET ADDRESS)**

11301 Olive Blvd.  
St. Louis, MO 63141

(b) Mailing address of limited liability company: \_\_\_\_\_

☒

**(Note: MAY BE POST OFFICE BOX)**

11301 Olive Blvd.  
St. Louis, MO 63141

02/24/2006

3. Date of filing/registration in Florida

M06000001146

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State:

Registered Agent:

Michael Hoeflinger

Registered Office Address:

11803 NE 11 Place  
Biscayne Park, FL 33161

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

**NEW** Registered Agent:

NRAI Services, Inc.

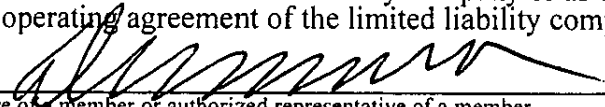
**NEW** Registered Office Address:

2731 Executive Park Drive, Suite 4

**(MUST BE FLORIDA STREET ADDRESS)**

Weston, FL 33331

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.

  
Signature of a member or authorized representative of a member

DAVID W. WEYGAERT.  
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 608, 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.*

by: Matt Thompson **Matt Thompson, Assistant Secretary**  
Signature of Registered Agent

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

**FILING FEE: \$25.00**