## MO600003466

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

MAR 2 3 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
	an Management Group, LLC of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
Victor Alfano	
Name of Person	
NRAI Corporate Services Firm/Company	SE SE
16055 Space Center Blvd., S	HAR 22 AM D 0 CRETARY OF STATE AHASSEE, FLORID
Houston, TX 77062  City/State and Zip Code	F STATE FLORIDA
M1, ++ ciohn 1955 @ Ceync. E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this r	natter, please call:
Victor Alfano Name of Person	at ( 800 ) 862-5438  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 follo	owing amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

## 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.

Name of the limited liability company: Meridian Management Group, LLC	
2. (a) Principal office address of limited liability comp	any: 800 Kinderkamack Road, Suite 302
(Note: MUST BE STREET ADDRESS)	Oradell, NJ 07649
(b) Mailing address of limited liability company:	800 Kinderkamack Road, Suite 302
(Note: MAY BE POST OFFICE BOX)	Oradell, NJ 07649
06/26/2006	M0600003666
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dep of State:
Registered Agent:	John D. Hatch, Esq.
Registered Office Address:	1267 Berkshire Lane, Suite 200 Tarpon Springs, FL 346887
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	IEW Registered Office address
NEW Registered Agent:	NRAI Services, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue
	Tallahassee ,FL32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as off or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote
Kevin Leys, Manager Printed or typed name of signee	<del></del>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this accument is being filled to address, I hereby confirm that the limited liability compounds NRAI Services. Inc.  Signature of Registered Agent Victor Alfano, Vice President	
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314

**FILING FEE: \$25.00** 

INHS18 (05/08)

by: