M06000003666

(Re	questor's Name)			
(Ad	dress)			
(Address)				
(Cit	y/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
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SUBJECT: Meridian Management Group, LLC	
Name of	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	ter to the following:
Elizabeth Harker	
Name of Person	
3H Agent Services, Inc.	
Firm/Company	
36 Long Alley, 2nd Floor	
Address	
Saratoga Springs, NY 12866	
City/State and Zip Code	
sosfilings@3hcs.com E-mail address: (to be used for future annual re	nort notification)
	•
For further information concerning this matter, pleas	e call;
Elizabeth Harker at	(518) 583 - 0639
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a cheek for the following amo	unt:
Enclosed is a check for the following amo	
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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. N	ame of the limited liability company: Meridian Manag	gement G	roup, LL	<u> </u>		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)	Mailing address of lir	mited liability compar	
	800 Kinderkamack Rd, Ste 302		800 k	Cinderkamack Rd, Ste 30	02	
	Oradell, NJ 07649		Orado	ell, NJ 07649		
	06/26/2006		M060	000003666		
3.	Date of filing/registration in Florida	4.		Document numb	er	
5. (a)	Registered Agent and Registered Office shown on the records of NRAI Services, Inc Registered Office Address (MUST BE FLORIDA STREET)		. <u>-</u>	f State:		
	1200 South Pine Island Road				in the second	
	Plantation F				7977 NOV 2.5	Trick Section Section
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office :	address:		5 PH I	() () () () () () () () () ()
	3H Agent Services, Inc.					
	NEW Registered Office Address:					
	1415 Panther Lane Suite 327					
	Naples	-L <u>3410</u>)			
chang agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited laterer authorized by an affirmative vote of the members ticles of organization or the operating agreement of the attraction of a member of a member or authorized representative of a member of a member or authorized representative of a member or authorized representative of a member of a member of a member of a	ne registe liability (s of the li ne limited	ered office company mited lia I liability	te and the business off the it is hereby confirmed the bility company or as off the company. Natalie Logan, Second or typed natality. I further as	fice of the register ed that the change otherwise provide cretary of Sole Name of signee	ed (s) d in <u>1embe</u> :
Signati	ure of Registered Agent Elizabeth Harker, President of 3H Agent	Services,	Inc.			