

M10000001850

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
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D. BRUCE

APR 17 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	Mercury Z, LLC				_		
	Name of 1	Limited Liabili	ity Company				
Dear Sir or Madar	n:						
The enclosed Reg	istered Agent/Registered (Office Change	and fee(s) are	e submitted f	or filing	g.	
Please return all co	orrespondence concerning	this matter to	the following	g:			
	Linda Stauffer Name of Person		_				
NI	RAI Corporate Services Firm/Company		_			,	
16055 S	pace Center Blvd., Suit	e 235	_				
	Address					:	
						ಸ	
<u></u>	louston, Texas 77062				2,5	7	
	City/State and Zip Code		_			>	
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SRPHIPPS F-mail address: (to	MERCURYZ. OM be used for future annual report n	\ potification\	_			\$1:8119 91 %	ſ
D-man address. (u	o be used for future aimual report in	ourication)			E S	75	
For further inform	ation concerning this matt	er, please call:		2	BH.	eu T	
Lin	da Stauffer	900	`	862-5438			
	e of Person	_ at (<u>800</u>	_) Area Code & Day	time Telephone 1			-
STDEET/C	OURIER ADDRESS:	N.E.A.1		DEGG.			
Registration		Registration Section					
	Corporations	Division of Corporations					
Clifton Buil		P.O. Box 6327					
	tive Center Circle	Tallahassee, Florida 32314					
Tallahassee,	Florida 32301						
Enclosed is	s a check for the followin	g amount:				,	
\$25 Filin	ng Fee	\$55	\$55 Filing Fee & Certified Copy				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR SOTH 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:	Mercury Z, LLC				
2. (a) Principal office address of limited liability company	3700 Regency Parkway, Suite 100				
(Note: MUST BE STREET ADDRESS)	Cary, NC 27518				
(b) Mailing address of limited liability company:					
(Note: MAY BE POST OFFICE BOX)					
April 23, 2010	M1000001850				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:				
Registered Agent:	C T Corporation System				
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address: NRAI Services, Inc. 515 East Park Avenue				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	o to caar and to lie				
	Tallahassee ,FL32301				
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fland the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Edward Kopko Printed or typed name of signee	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization				
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company NRAI Services. Inc. Signature of Registered Agent Linda Stauffer, Assistant Agenty	Trace to get in this conceits. I follow to				

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

by: