00003286

(Requestor's Name)						
(Address)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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4 5/12/2022

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 657435 8377254
AUTHORIZATION :
COST LIMIT : (\$\frac{250.00}{250.000} \text{lenger}
ORDER DATE: May 4, 2022
ORDER TIME : 2:08 PM
ORDER NO. : 657435-267
CUSTOMER NO: 8377254
CHANGE OF AGENT
NAME: MINNESOTA LIMITED, LLC
DIRACE DESCRIPTION THE POLICYTIC AC PROCE OF THE TWO
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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.

Na	une of the limited liability company: MINNESOTA LIF	MITED), L!	.C	
(a)	18640 200th Street		(b)	3100 Inte	erstate North Circle, Suite 300
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Big Lake, MN 55309	_		Atlanta, (GA 30339
	06/28/2011		N	11100000	03286
	Date of filing/registration in Florida	4.	_		Document number
(a)	NRAI SERVICES, INC.				
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_
	PLANTATION FL.	33324	ļ 		202 SE0
(b)					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	addı	<u>'ess</u> :	ZOZZ HAY I
	Corporation Service Company				YII MII: 25
	NEW Registered Office Address:				
	1201 Hays Street				7E
	Tallahassee	32301			
inge ent w s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law.	registe bility of the li imited	ered corr mit l lia	office an ipany, it i ed liabilit bility con	In the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
Sionat	ure of a member or authorized representative of a member	JII	I GI	IMI, Autho	Printed or typed name of signee
erek ovisio obli mere	by accept the appointment as registered agent and agre ins of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I have	re to ac perforn for in ereby (ct ii nan Ch con	i this cap ice of my apter 605 firm that	acity. I further goree to comply with the
	Drace Cokinby				
natur ace	re of Registered Agent E. Kirby, Asst. Vice President of Corporation Service	Comp	any		
	Division of Corporations • P.O. B	ox 63	27•	Tallaha	ssee, FL 32314