M17000009283

(Req	juestor's Name)	
(Add	iress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Meridian X Chan Name of Foreign	GE, LLC Limited Liability Comp	any
Dear Sir or Madam:		
The enclosed application, certificate and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
Jeffrey Bernstein Name of Person		
Meridian Xchange LUC Firm/Company	<u></u>	
4300 West Lake Hary Address	Blud. suite	2 1010 # 356
Lake Hapy FL 32746 City/State and Zip Code	-2012	
E-mail address: (to be used for future annual re	eport notification)	
For further information concerning this matter, pl Septiment of Person Amendment of Person	1 (856) 25	19-1801 Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, Florida 32314
\$25 Filing Fee S30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	
State: MERILIAN Xchang	e, LLC
Enter new principal office address, if applicable:	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	bility company is: 1700009283
3. Jurisdiction of its organization:	do
4. Date authorized to do business in Florida:	/ /
SECTION II (5-9 complete only the applicable of	changes)
New name of the limited liability company: (must	t contain "Limited Liability Company, " "L.L.C.," or "LLC.")
	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name or "LLC.")
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	d officer address on our records, enter the name of the new ddress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida Street Addres
	, Florida Zip Code
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 605, 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.

Title/Capacity yber Te	Name Har Perustein	Address 4300 Clast Ship Lake Hary, FC 32746	Type of Act
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 . 			FOR DA
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			Add
aforementioned an	ficate, if required: no more than nendment(s), duly authenticated the law of which/this en/fly/is o	by the official having custody of recor	Remo

Filing Fee: \$25.00