

M18000005618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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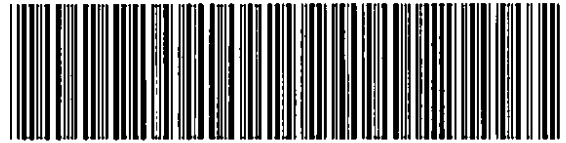
(Business Entity Name)

(Document Number)

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RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

18 JUL 31 PM 1:58

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AUG 01 2018

2018 JUL 31 PM 3:41

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I200000000195

REFERENCE : 326727 4320855

AUTHORIZATION :



COST LIMIT : \$25.00

ORDER DATE : July 31, 2018

ORDER TIME : 11:05 AM

ORDER NO. : 326727-020

CUSTOMER NO: 4320855

CHANGE OF AGENT

NAME: MERIDIAN STAFFING SERVICES,  
LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner

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.*

1. Name of the limited liability company: Meridian Staffing Services, LLC

2. (a) C/O WHITE WOLF CAPITAL, LLC (b) C/O WHITE WOLF CAPITAL, LLC

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

601 BRICKELL KEY DRIVE, SUITE 700

601 BRICKELL KEY DRIVE, SUITE 700

MIAMI, FL

33131

MIAMI, FL 33131

06/14/2018

M18000005618

3. Date of filing/registration in Florida

4. Document number

5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

C T CORPORATION SYSTEM

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

(b) Corporation Service Company

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street

NEW Registered Office Address:

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

CORRY DOYLE  
Printed or typed name of signer

*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.*

Roxanne Turner  
Signature of Registered Agent Corporation Service Company

**Roxanne Turner**  
Asst. Vice President

BY:

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00