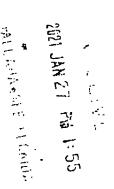
## M18000007907

(Requestor's Name)						
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PICK-UP	MAIT	MAIL				
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Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:01/	27/2021					
	Chris Vick	_ <del></del>				
	1320502					
Articles of	Incorporation/Authori	zation to Transact Business				
Amendment						
✓ Change of Agent						
Reinstate	ment					
Conversion	n					
Merger						
☐ Dissolution/Withdrawal						
Fictitious	Name					
Other						
Authorized Amou Signature:	\$25.00°	,				

F: 800.944.6607

## 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.	Na	me of the limited liability company:		MEDN	IACH, LLC
	(a)	A CADM HILL LAND			4 FARM HILL LANE
2. (a	(ω)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del>_</del>		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		Muttontown, NY 11732	_		Muttontown, NY 11732
3.		Nov 07, 2019  Date of filing/registration in Florida	 4.		2852008970CR  Document number
5.	(a)	KATHRINE MEER			
٠,	(4)	Registered Agent and Registered Office shown on the records of	the Flor	da Dept. of State	- e:
		115 North Calhoun Street, Suite	e 4		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  Muttontown, NY 11732  2852008970CR  Document number  Dept. of State:  2301  State of Florida, it is hereby confirmed that after stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) itted liability company or as otherwise provided in
		Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRE</u>	SSI	21
			. <u></u>		- <sup> </sup>
		, FL	·	32301	
	(b)	COGENCY GLOBAL INC.			
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	
		115 North Calhoun Street, Suite	4		9: 43
		NEW Registered Office Address:			- m
		Tallahassee, FL	<u> </u>	32301	-
the age wa the	cha ent v s/we arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the re ability of the l	gistered office company, it i imited liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in in inpany.  Tony MacKay
S	igna	ture of a member or authorized representative of a member			-
I h pro the to t not	erei oviși obl mere tified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I do in writing of this enange.	ree to o perfoi ed for i hereby	nct in this cap mance of my n Chapter 60: confirm that	vacity. I further agree to comply with the duties, and I am familiar with and acceps, F.S. Or, if this document is being filed the limited liability company has been
Sig	gnatu	re of Registered Agent	Dec 6	174 T-84-	econ El 22214

FILING FEE: \$25.00

INHS18 (2/14)