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(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations
suвјест: MHV 2019-1 Personal Property, LLC
Name of Foreign Limited Liability Company
Dear Sir or Madam:
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rod Curtis
Name of Person
MH Ventures 2019-1, LLC
Firm/Company
2901 Butterfield Rd
Address
Oak Brook, IL 60523
City/State and Zip Code
rod.curtis@inland-investments.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Delmotte 248 301-8335
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Conclosed is a check for the following amount: \$\begin{align*} S25 Filing Fee &

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		Department of
State: MHV 2019-1 Personal Prope	erty, 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)		
2. The Florida document number of this limited liab	oility company is: M19000	003779
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 4/12	2/2019	
SECTION II (5-9 complete only the applicable ci	nanges)	
5. New name of the limited liability company: (must	contain "Limited Liability Con	mpany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted if copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	aging members adopting the a	ousiness in Florida and attach a ternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	officer address on our record tress here:	s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	 	· · · · · · · · · · · · · · · · · · ·
	Enter Florid	a Street Address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as register document is being filed to merely reflect a change in liability company has been notified in writing of this	and agree to act in this capac nd complete performance of n red agent as provided for in C 1 the registered office address,	city. I further agree to comply with ny duties, and I am familiar with hapter 605, F.S. Or, if this

Title/ Capacity Name		<u>Address</u>	Type of Action
	Ivonne Padilla	1607 33rd Ave E.	Add
		Bradenton, FL 342	08 Remo
word Menter	Greg Kellis	11012 51st Ave N.	Add
		St. Petersburg, FL 337	′08
			Add
			Remov
			Add
			Remove
			Add
		 	Remov
aforemention	nder that aw of which this couldy it on	by the official having custody of records in th	c

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Filing Fee: \$25.00