M22000001230

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(Document Number)				
med Copies	_ Certificates	of Status		
coral Instructions to Filing Officer				
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IALLAHASSÉE, FLUKID

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

ACCOUNT NO. : I2000000195
REFERENCE : 252804 7425870
AUTHORIZATION : Spelled Man
COST LIMIT : \$ 25.00
ORDER DATE : December 15, 2022
ORDER TIME : 8:51 AM
ORDER NO. : 252804-020
CUSTOMER NO: 7425870
CHANGE OF AGENT
NAME MG (NG) 2 FFG
NAME: MC (US) 3 LLC
DICAGE DEMINA MUE COLLOWING AC DROOF OF CILING
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.

1. N	lame of the limited liability company: MC (US) 3 LL	С		
2. (a)	·	(1	o)	
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Ma	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	521 W 57TH STREET		521 W 57TI	H STREET
	NEW YORK, NY 10019		NEW YORK	K, NY 10019
	01/25/2022		M22000001	230
3.	Date of filing/registration in Florida	4.	D	ocument number
5. (a)			
,	Registered Agent and Registered Office shown on the records of	of the Florida	a Dept. of State:	2
	C T CORPORATION SYSTEM			77 ! 2022 DEC
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	27	그음 등 기기
	1200 SOUTH PINE ISLAND ROAD			22
	PLANTATION	-L_33324		
				AH 10: 2
(b)	Enter name of NEW Registered Agent and/or NEW Register			27
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office ad	dress:	
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee F	L 32301		
chang agent was/w the ar	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited by the rere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the JILL CILMI	ne registere liability co s of the lim se limited l	ed office and tompany, it is holidated liability comparished	he business office of the registered ereby confirmed that the change(s) company or as otherwise provided in
Sign	ature of a member or authorized representative of a member		Р	rinted or typed name of signee
provis the ob to mei	by accept the appointment as registered agent and agions of all statutes relative to the proper and completed ligations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	e performe led for in C I hereby co	ance of my du Thapter 605, F Infirm that the	ties, and I am familiar with and accept F.S. Or, if this document is being filed I limited liability company has been
Signat	Thora CKWbly ure of Registered Agent	GRACI	DE. KIKBY, 2	ASST. VICE PRESIDENT

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00