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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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BIVISION OF CORPORATION
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COVER LETTER

TO:	Amendment Division of	Section Corporations				
SUBJE	СТ:	N	IIED, INC.			
		N	ame of Corporat	ion		
DOCU	MENT NUN	IBER:	V4067	73		
The enc	losed Statem	ent of Change of Register	red Office/Agent	and fee are subm	nitted for filing.	
Please re	eturn all corr	espondence concerning th	nis matter to the	following:		
	_		Brian A. Hart			
		Nar	ne of Contact Pe	rson		
	The Hart Law Firm, P.A.					
	Firm/Company					
	255 Alhambra Circle, Suite 850					
	Address					
_	•	Coral C	Sables, Florida	33134		
	Coral Gables, Florida 33134 City/State and Zip Code bahart@hartattorneys.com					
	E	-mail address: (to be us	sed for future ar	nual report not	fication)	
For furth		on concerning this matter	•	305 ₎	444-6220	
		of Contact Person	at (rea Code & Dayt	ime Telephone Number	
Enclosed	l is a \$35.00	check made payable to th	e Department of	State.		
		Mailing Address: Amendment Section Division of Corporar P.O. Box 6327 Tallahassee, FL 323		Street Address Amendment S Division of Co Clifton Buildi 2661 Executiv Tallahassee, F	ection orporations ng ve Center Circle	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: MIED, INC.
2. The principal office address: 10680 OLD ST. AUGUSTINE ROAD
JACKSONVILLE, FLORIDA 32257
3. The mailing address (if different): 199 NE 89 STREET EL PORTAL, FLORIDA 33138
4. Date of incorporation/qualification: 06-03-1992 Document number: V40673
The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
CHARLES R. CURLEY, JR. ESQ.
1301 RIVERPLACE BLVD, SUITE 1500
JACKSONVILLE, FLORIDA 32207
JACKSONVILLE, FLORIDA 32207 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): BRIAN A. HART 255 ALHAMBRA CIRCLE, SUITE 850 P.O. Box NOT acceptable
BRIAN A. HART
255 ALHAMBRA CIRCLE, SUITE 850 P.O. Box NOT acceptable
CORAL GABLES, FLORIDA 33134
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.
Signature of an officer or director Printed or typed name and life
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
JUNE 24, 2011 Signature of Registered Agent Date
f signing on behalf of an entity:
BRIAN A. HART
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)