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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

**Enter the email address for this business entity to be used for future...
annual report mailings | Enter only and the second of the second o annual report mailings. Enter only one email address please.**

Email Address:___

LLC REGISTERED AGENT CHANGE TGHFL 431 FRONT LLC

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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.

ì.	Na	me of the limited liability company: TGHFL	43	1 FRC	NT LLC		
2.							
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	•		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		431 Front Street Unit 4			een Avenue Suite 101-283		
		Key West, FL 33040	_	Sheri	dan, WY 8	3280	1
		09/09/2022		L220	0039547	3	
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	HIDALGO-GATO & ASSOCIA Registered Agent and Registered Office shown on the records of the 2304 BAY VILLAGE CT Registered Office Address (MUST BE FLORIDA STREET A)	ds of the Florida Dept. of Stat			· +1	2023 FE
		WEST PALM BEACH FL.	334	10		ည (၁ (၁) _
(b)		Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Office address: 7901 4th St N		· •	78 2: 0	; (. ;	
					,	· 😇)
		NEW Registered Office Address: STE 300					
		St. Petersburg	337	02			
the ago wa:	chai int w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of t ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of tles of organization or the operating agreement of the li	he regi pility co the lin	stered office ompany, it is uited liability	and the business off hereby confirmed th company or as othe	ice of the at the cl	ie registered hange(s)

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.

Robin Jones

Printed or typed name of signee

Dold Costs David Roberts - Assistant Secretary

Signature of a member or authorized representative of a member

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