L23000487686

(Requestor's Name)					
(Address)					
(Address)					
(33323)					
(City/State/Zip/Phone #)					
(City/State/Zip/Prione #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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COVER LETTER

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TO: Registration Section Division of Corporations		
Tin City 1, LLC SUBJECT:		
	Name of Limite	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change	and fee(s) are submitted for filing.
Please return all correspondence concernin	g this matter to	the following:
Nicole Macomb		
Name of Person	-	
Risc Up Legal		
Firm/Company		
1400 Marsh Landing Parkway, Suite 108		
Address		
Jacksonville Beach, Florida 32250		
City/State and Zip Coo	de	
service@riscuplegal.com		
E-mail address: (to be used for future	annual report n	otification)
For further information concerning this ma	tter, please call:	
Nicole Macomb	904	877-1010
Name of Person	aı (Area Code & Daytime Telephone Numbe
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the follow	ving amount:	
■ \$25 Filing Fee		S55 Filing Fee & Certified Copy
INHS18 (2/14)		

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	ame of the limited liability company: Tin City 1, LL	.C		
2. (a)			(b)	
-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		, <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	49 Jefferson Avenue		49 Jeffersor	n Avenire
	Ponte Vedra Beach, Florida 32082		Ponte Vedi	a Beach, Florida 32082
	11/16/2022		L220004876	86
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	FT CORPORATE SERVICES, LLC			
J. (a)	Registered Agent and Registered Office shown on the records	- :.		
	FT CORPORATE SERVICES, LLC			20
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			Ē
	501 Rierside Avenue, Suite 700			· :
	Jacksonville	, FL_32202	-	. Cr
		, I°1		-
(b)				: - 1 1 190
(-,	Enter name of NEW Registered Agent and/or NEW Registered Office address:			ហ
	CAIN & CAIN, PLLC	α		
	NEW Registered Office Address:			-
	1400 Marsh Landing Parkway, Suite 108			
				-
	Jacksonville Beach	. FL_32250		
chanoc	imited liability company is not organized under the cor changes are made, the Florida street address of will be identical for, in the case of a Florida limited at the case of the members authorized by an affirmative vote of the members of organization or the operating agreement of	laws of the	red office and	the business office of the registered
		Ar	on J. Price	
_	ture of a member authorized representative of a member			Printed or typed name of signee
I here provisi the obl to mero notified	by accept the appointment as registered agent and ions of all statutes relative to the proper and compl ligations of my position as registered agent as prov ely reflect a change in the registered office address d in writing of this change.	agree to a lete perfori ided for in , I hereby	ct in this capa nance of my a Chapter 605, confirm that t	icity. I further agree to comply with the luties, and I am familiar with and accep, F.S. Or, if this document is being filed the limited liability company has been
Signard	re of Registered Agent			
-	·			