## 110000034708

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## COVER LETTER

TO: Registration Section Division of Corporations		Invoice # 933b170605		
SUBJECT: Labre Investment Trust,LL	.c			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered O	ffice Change an	d fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:				
Joel L. Tabas		·		
Name of Person		ugoo65		
Tabas & Soloff, P.A.		Int		
Firm/Company				
		023-00-63180.00		
25 SE 2nd Avenue, Suite 248		d 2 500		
Address		+2		
Miami, Florida 33131		7490065 Hot 933-00-63180.00 \$2500 Pg 1 of 2		
City/State and Zip Code				
jtabas@tabassoloff.com				
E-mail address: (to be used for future an	nual report noti	fication)		
For further information concerning this matter, please call:				
Joel L. Tabas	305	375-8171		
Name of Person	***************************************	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
2 \$25 Filing Fee	☐ \$55 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. N	dame of the limited liability company: Labre Investm	ment Trust, LLC
2. (a)	Tabae & Roloff D A	(b) Tabas & Soloff, P.A.
<i>μ</i> . (u)	Principal office address of limited limbility company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	25 S.E. 2nd Ave., Suite 248	25 S.E. 2nd Ave., Suite 248
	Miami, Florida 33131	Miami, Florida 33131
	3-29-10	L10000034708
3.	Date of filing/registration in Florida	4. Document number
5. (a	Tabas & Soloff, P.A.	
J. (u	Registered Agent and Registered Office shown on the records of a	the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)
	14 NE 1st Ave., PH	·
	Miami, , FL	33132
(b)	Tabas & Soloff, P.A.	pg 2 of 2
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:
	NEW Registered Office Address:	
	25 S.E. 2nd Ave., Suite 248	OF S
	Miami	33131 RR TAIL TO THE SERVICE OF THE
the chagent was/w the ar	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia zere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the latter of a member or authorized representative of a member	Joel L. Tabas  Printed or typed name of signee
provis the ob to me notifie	rións of all statútes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change	ree to act in ints capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept a for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been
Signat	ure of Registered Agent	