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COVER LETTER

TO: Registration Section Division of Corporations	•				
Carver Investment Trust, LLC SUBJECT:					
	Limited Liability Company				
Dear Sir or Madam:	`				
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Joel L. Tabas					
Name of Person	7490065				
Tabas & Soloff, P.A.	7490065 HOT				
Firm/Company	981-00-63180.00				
25 SE 2nd Avenue, Suite 248	981-00-63180.00 \$2500 Pg 1 of 2				
Address					
Miami, Florida 33131	pg 1 of 2				
City/State and Zip Code					
jtabas@tabassoloff.com					
E-mail address: (to be used for future annual r	report notification)				
For further information concerning this matter, plea	se 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 amo	ount:				
☑ \$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. Na	ame of the limited liability company: Carver Inves	tment	Tr	ust, Li	LC					
2. (a)	Tabas & Soloff, P.A.		(b)	Taba	as &	Soloff, P	.A.		· · · · · · · · · · · · · · · · · · ·	_
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(6)			failing addres	s of limite	ed liability com		_
	25 S.E. 2nd Ave., Suite 248			25 S.	.E. 2	2nd Ave.,	Suite 2	248		
	Miami, Florida 33131			Miam	ιi, F	lorida 33′	131			_
	3-4-10 -		l	_1000	0002	24543				
3.	Date of filing/registration in Florida	4.	-			Document	number			
5. (a)	Tabas & Soloff, P.A.									
J. (a)	Registered Agent and Registered Office shown on the records of	the Flor	ida	Opt. of	State	:				
	Registered Office Address (MUST BE FLORIDA STREET) 14 NE 1st Ave., PH	ADDRE	<u>(SS)</u>			_		10		
	Miami,	3313	32			Pa	, 2	0+2	_	
(b)	Tabas & Soloff, P.A.					• • •		⊳ίζοι ΓΑLLΑ	₹	
(5)	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	CE11:						194421
								SER A		**
	NEW Registered Office Address:)T		
	25 S.E. 2nd Ave., Suite 248							S.≯		
	Miami Fi	3313	31						۵	
the cha agent w was/we	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reability of the l	gist cor imi	ered of npany, ted liab	ffice , it is bility	and the bu hereby cor company	siness o afirmed	ffice of the rathet that the chan	egistere ige(s)	:d
		J	oel	L. Ta	bas	,				_
	ure of a member or/abitherized/representative of a member					Printed or typ		-	111 11	
provision the oblination to mere	by accept the apphintment as registered agent and agroups on so all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address. I writing of this change.	ree to c perfor d for i hereby	act i ma n Ci v coi	n this nce of napter yirm t	capa my a 605, hat t	icity. I furt luties. and . F.S. Or. i he limited l	her agro l am fan f this do liability	ee to comply niliar with an ocument is be company has	with the ad accepting files s been	e ot d
Signatu	e of Registered Agen			,						
	Division of Corporations P.O. 1				thass	see, FL 323	114			

INHS18 (2/14)