

A16000000381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

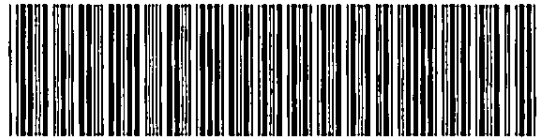
(Business Entity Name)

(Document Number)

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2018 JAN 18 11:29:50

JAN 19 2018  
J. HARRIS

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. C.T.V. BINGA HOLDINGS LIMITED LIABILITY LIMITED PARTNERS  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 08/10/2016 3. A16000000381  
Date of filing/registration in Florida Florida document number

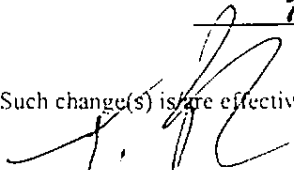
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

BUSINESS FILINGS INCORPORATED  
Name  
1200 SOUTH PINE ISLAND RD  
Address  
PLANTATION FL 33324  
City, State and Zip

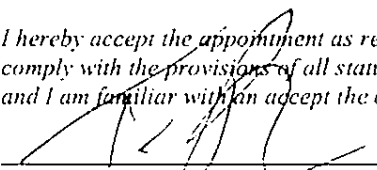
5. The name and Florida street address of the new registered agent and/or office:

TOM FRANCO  
Name  
4029 HENDERSON BLVD  
Florida street address (P.O. Box not acceptable)  
TAMPA FL FL 33629  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

  
Signature of General Partner

*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.*

  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

2016 JUL 18 09:00:00