

A19000000022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

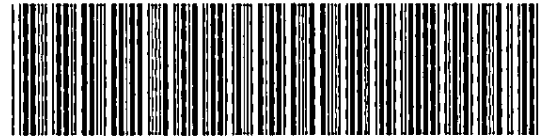
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 55 Thomson Street Investments Limited Partnership  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A19000000022

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Darya Kovalska  
Contact Person

DearthGalat LLC  
Firm/Company

2859 Paces Ferry Road SE, Ste 1140  
Address

Atlanta, GA 30339  
City, State and Zip Code

Darya@dgtaxlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darya Kovalska at ( 770 ) 280-5614  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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**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. 55 Thomson Street Investments Limited Partnership  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 12/26/18 3. A19000000022  
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:

CORPORATE CREATIONS NETWORK INC.  
Name

11380 PROSPERITY FARMS ROAD #221E  
Address

PALM BEACH GARDENS, FL 33410  
City, State and Zip

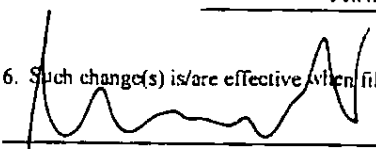
5. The name and Florida street address of the new registered agent and/or office:

Joy Myers  
Name

301 S New York Ave., Suite 200  
Florida street address (P.O. Box not acceptable)

Winter Park, FL 32789  
City, State and Zip

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

  
Ulrike Weeber, CEO of Yewcreek, Inc., General Partner  
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

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