

A07000000791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

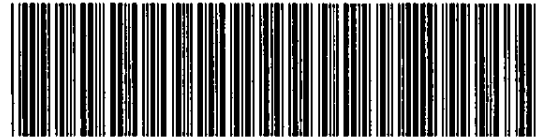
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
FEB 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TDB Holdings, LP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A07000000791

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:

Brett Baker
Contact Person

Best Bayshore Retirement
Firm/Company

701 S. Howard Ave, Ste 106-392
Address

Tampa, FL 33606
City, State and Zip Code

brett.baker@bayshorecl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brett Baker at (813) 280-9948
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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TALLAHASSEE, FLORIDA

**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. TDB Holdings, LP
Name of Limited Partnership or Limited Liability Limited Partnership
2. 2/1/17 3. A07000000791
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:

Mandelbaum, Fitzsimmons, Hewitt & Cain, PA
Name
100 S Ashley Dr, Ste 1100
Address
Tampa, FL 33602
City, State and Zip

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

Best Bayshore Retirement, LLC ✓
Name
701 S. Howard Ave, Ste 106-392
Florida street address (P.O. Box not acceptable)
Tampa FL 33606
City, State and Zip

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

[Signature], Manager, TDB Management, LLC
Signature of General Partner 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]
Signature of Registered Agent

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

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TALLAHASSEE, FLORIDA

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