## A11 000 000 798

(Rec	questor's Name)	<u> </u>
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Dox	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	1
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TOTAL STANDARD TOTAL STANDARD

APR 0 6 2013



CSC - WILMINGTON 251 Little, Falls Drive. Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: March 25, 2019

Order#: 682424/190

Re: TRINITY TOWERS SOUTH PRESERVATION ASSOCIATES LLLP

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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. TRINITY TOWER	TY TOWERS SOUTH PRESERVATION ASSOCIATES LLLP						
Name of Limite	d Partnership or Lin	nited Liability	Limite	ed Partners	hip		
211/03/201	1	3.		A1100000798 Florida document number			
Date of filing/registration	filing/registration in Florida Florida doc		rida docum	ument number			
4. The name of the registered ages Department of State:	nt and the registered	office addres	s as sho	own on the	records of the Florida		
REGIS	STERED AGEN	IT SOLUTI	IONS	. INC			
	Nar			<u>,</u>			
155	OFFICE PLAZ	A DRIVE S	SUITE	ĒΑ			
	Addr	ress		-	10 X		
TALLA	AHASSEE, FL 3	2301			- 47		
	City, State	and Zip					
5. The name and Florida street add	dress of the new regi	stered agent :	ınd/or c	office:			
(	Corporation Ser	vice Comp	any		. س.		
	Nan	ne			يان د چين		
	1201 Hay	s Street			:		
Flor	ida street address (P.		ceptab	le)			
	Tallahassee	and Zin	FL.	32301			
	City, State	and Zip	·				
6. Such change(s) is/are effective	when filed by the Fl	orida Denartn	nent of	State			
Sie E Cieni	-	orida iseparui	item of	State.			
Signature of General Partner				_			
Jill Cilmi, Vice President on behalf I hereby accept the appointment as							
comply with the provisions of all s							
and I am familiar with an accept to	he obligations of my	position as re	egistere	ed agent.			
By: Corporation Service	21 party						
Signature of Registered Agent							
Grace E. Kirby, Asst. Vice	President						
Filing Fee:	\$35.00						
Certified Copy (optional):	\$52.50						