

A18000000 242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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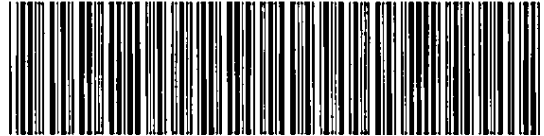
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 25 2018

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRESS INVESTMENTS, LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A18000000242

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:

Donald R. Tescher

Contact Person

Tescher & Associates, P.A.

Firm/Company

925 S. Federal Highway, Suite 500

Address

Boca Raton, FL 33432

City, State and Zip Code

rruss22@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donald R. Tescher

Name of Contact Person

at (561)

997-7008

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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SECRETARY OF STATE
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. Tress Investments, LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

2. June 13, 2018 3. A18000000222
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:

Donald R. Tescher
Name

925 S. Federal Highway, Suite 500
Address

Boca Raton, FL 33432
City, State and Zip

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

Russell Polen
Name

6121 Hollows Lane
Florida street address (P.O. Box not acceptable)

Delray Beach FL 33484
City, State and Zip

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

X 
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.

X 
Signature of Registered Agent

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

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TALLAHASSEE, FLORIDA