

B14000000178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Change

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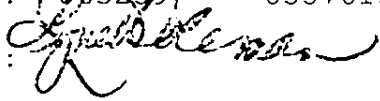
A. RAMSEY

JAN 16 2025

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : ~~863259~~ 8357615

AUTHORIZATION : 

COST LIMIT : \$ 35.00

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ORDER DATE : December 30, 2024

ORDER TIME : 9:34 AM

ORDER NO. : 863259-014

CUSTOMER NO: 8357615  
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CHANGE OF AGENT

NAME: TAH HOLDING LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS: \_\_\_\_\_

**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. TAH HOLDING LP

Name of Limited Partnership or Limited Liability Limited Partnership

2. 07/21/2014

Date of filing/registration in Florida

3. B14000000178

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:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

City, State and Zip

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

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box not acceptable)

Tallahassee

FL 32301

City, State and Zip

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

/s/ Wissam Francis

Signature of General Partner

Wissam Francis, Authorized Person on  
behalf of TAH Holding GP LLC,  
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.*

*Ami M. Casper*

Signature of Registered Agent

Corporation Service Company  
Ami M. Casper, Asst. Vice President

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

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