Florida Department of State **Division of Corporations Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CAPITOL CORPORATE SERVICES, INC.

Account Number : I20160000048 Phone -: (800)345-4647

Fax Number : (800)432-3622

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE TARANTINO PROPERTIES, INC.

Certificate of Status	0
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COVER LETTER

TO:	Amendment Section Division of Corporations	·					
SUBJ	ECT: TARANTINO PROPERTIE	S INC Corporation					
DOCUMENT NUMBER: F12000001893							
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Myra Simmons							
	Name of Contact Person						
	Capitol Services Registered Agent Department						
	Firm/Company						
	PO Box 1831 Address						
	, m	ALCORD					
	Austin, TX 78767						
	City/State and Zip Code						
	E-mail address: (to be used for future annual report notification)						
For fu	rther information concerning this matter, please	o call:					
	Myra Simmons	ar (800 \345-4647					
	Name of Contact Person	at (800) 345-4647 Area Code & Duytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.							
	Mailing Address: Amendment Section	Street Address:					
	Amendment Section Division of Corporations	Amendment Section Division of Corporations					
	P.O. Box 6327	Clifton Building					
	Tallahassee, FL 32314	2661 Executive Center Circle					
	•	Tallahassee, FL 32301					

CR2E045 (03/12)

(03/03) 08/09/2016 03:29:23 PM

FILLED SECRETARY OF STATE SIVISION OF CORPORATION

2016 AUG -9 AM 9: 10

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0 ange is submitted for a corport or to change its registered of	rration organized und	ier the laws of the State	of <u>TEXAS</u>			
1. The name of	the corporation: <u>TARAN</u>	TINO PROPE	RTIES INC				
2. The principal	2. The principal office address: 7887 San Fellpe, Ste. 237						
Houston,	TX 77063						
3. The mailing s	address (if different):						
4. Date of incor	pozation/qualification; 5/4	/2012 D	ocument number: F12	.000001893			
	d street address of the current nument of State: (If resigned,		l registered affice on file	with the			
	Matiock, George V						
	2549 Barrington Circle						
	Tellahassee	FL	32308				
6. The name and (if changed):	cty d street address of the new n	sus ogistered agent (if cha	Zp Cote mgcd) and /m registered	nffice			
	Capitol Corporate Se	ervices, Inc.					
	155 Office Plaza Drh	/e, Sulte A		_			
	Street Address	P.O. Box NOT comptable					
	Tallahassee	FL	32301	 .			
The street addr	oss of its revisioned office s be identical.	nd the street address	of the business office o	f its registered agent,			
	as sufforized by resolution he board, or the componention	duly adopted by its b has been notified in	<i>-T</i>	mad cfo			
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registe to comply with the provisio my duits, and I am familia is document is being filed in that the corporation has be	red agent and agree vis of all statutes rela ar with and accept th nerely to reflect a chi cen notified in writing	to act in this capacity, alive to the proper and a se obligation of my post ange in the registered o g of this change.	complete ion as registered fice address, i			
Dela	nee Case		8.9.16 Date				
If signing on be	chalf of an entity:						
Delanie Ca	se, Asst. Secretary or	behalf of Capito	ol Corponate Service	oes, inc.			
* * * FILING FEE: \$35.00 * * *							
М CR2B045 (03Л2)	Make checks pay all to: Division of Corn		epartment of State 6327, Tallahabere, F.	L32314			