L000000/1004

•	
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
	Marie and a second

Office Use Only

SECRETARY OF STATE TALLAHASSEE, FLORIDA



600054502126

05/27/05--01013--007 **25.00

- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the limited liability company is: TTL HOLDINGS, LLC.
2. The mailing address of the limited liability company is: 1000 NW 54 ST., STE J-1.
MINHI, FL 33127
09-13-2000 20000011004
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: T.F. R. A. LLC. Name
Name <u>D50 EAST HA LIAN DATE BEACH BIVD., STE 405</u> Address
HATTANDATE BEACH, FI 33009 City, State and Zip
6. The name and address of the new registered agent and/or office:
DAVID CLENDENEN PR S Name Name Florida street address (P.O. Box NOT acceptable)
Name 1000 N H 54 ST. STE J- Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
MIAHI, FL 33/27 TO City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
Signature of a member or authorized representative of a member)
DAVID CLENDENEN
(Printed or typed name of signee)
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 as provided for in Chapter 508, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.
Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00