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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TJG HOLDINGS, LLC

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

Pursuant to the provisions of sections 605,0114 or 605,0116, 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.	Name of the limited liability company: TJG HOLDII	NGS, LLC					
2. (a	201 S Biscayne Blvd	(1	c/o WPP	P. 175 Greenwich S	ŧ		
_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of l		•	•
	Suite 1400		11th Fl				
	Miami, FL 33131	·	New Yor	rk. NY 10007			
	11/15/1999		L99000007	7790			
3.	Date of filing/registration in Florida	4.		Document num	ber		
5. (SHARLACH, JEFFREY R						
(b)	Registered Agent and Registered Office shown on the record 201 S Biseavne Blvd	ds of the Florid	a Dept, of Sta	ete:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Suite 1400			_			
	Miami	, FL_33131		_			
	Corporate Creations Network Inc.			·		2023	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:					دي.	
	801 US Highway 1			_		ال	
	NEW Registered Office Address:				•	PH	ζ.
					1.0	بب	
	North Palm Beach	, FL_33408			• .	40	
chan agen was/	e limited liability company is not organized under the ige or changes are made, the Florida street address of it will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of	the registered liability co ers of the lin	ed office an ompany, it i uted liabilit	nd the business of is hereby confirm ty company or as	fice of the district of the di	he regis he chan	tered ge(s)
			ez, Attorney-in-Fact				
	nature of a member or authorized representative of a member			Printed or typed no	•		1.1 .1
provi the o to me	reby accept the appointment as registered agent and isions of all statutes relative to the proper and compobligations of my position as registered agent as proverely reflect a change in the registered office addressively in writing of this change.	lete perform	ance of mic	duties and Lam	Tamiliar	with an	d accent
<u>Car</u> Signa	los M Alvarez, Special Secretary attree of Registered Agent						