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(Requestor's Name)		
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SECRL TARY OF STATE

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:	TME Real Estate, LLC	
2. The mailing address of the limited liability comp	pany is : TME Real Estate, LLC c/o Gustavus	
Bass, Capital Asset Advisors, Inc., P. O. Box		
10/08/2003	L03000038460	
3. Date of filing/registration in Florida	4. Document number	
	est.	
5. The name of the registered agent and the register Florida Department of State:	ed office address as shown on the records of the	
. lerris Robinson		
12628 Arley Drive	Vame	
	Idress	
Orlando, FL 34786	ate and Zip	
6. The name and address of the new registered ager	. <u> </u>	
Corporation Company		
300 S. Orange Avenue, Suite 1000 (MRH)		
Florida street address (P.O. Box NOT acceptable)	
Orlando	FL 32801	
	e and Zip	
If the limited liability company is not organized unconfirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the change members of the limited liability company or as the operating agreement of the limited liability company.	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited nange(s) was/were authorized by an affirmative vote of otherwise provided in the articles of organization or	
Austania San		
(Signature of a member or authorized representative of a member)	•	
Gustavus Bass, Manager	The second secon	
(Printed or typed name of signee)	· · ·	
I hereby accept the appointment as registered ager comply with the provisions oll statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability of	nt and agree to act in this capacity. I further agree to o the proper and complete performance of my duties, of my position as registered agent as provided for in id to merely reflect a change in the registered office company has been notified in writing of this change.	
1/ Themy lines	Corporation Company of Orlando	
(Signature of Registered Agent)	By: J. Gregory Humphries, Vice President	
Division of Corporations, P.O.	Box 6327, Tallahassee, FL 32314	

FILING FEE: \$25.00