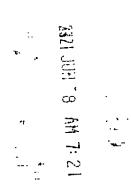
L040000 32428

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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COVER LETTER

	Registration Section Division of Corporations					
SUBJEC	TATAUM HOLDINGS. LLC					
	Name of Limited Liability Company					
Dear Sir	or Madam:					
The enclo	osed Registered Agent/Registered Office	Change and	fee(s) are submitted for filing.			
Please re	turn all correspondence concerning this r	natter to the f	following:			
EDUARI	DO GONZALEZ					
	Name of Person		_			
FLORIDA	A CORPORATE REGISTERED AGENTS,	LLC.				
	Firm/Company		_			
8323 NW	12 STREET, SUITE 102					
	Address					
DORAL,	FL 33126					
	City/State and Zip Code					
E.GONZ	ALEZ@GRC-CPA.COM					
E-m	nail address: (to be used for future annua	l report notifi	ication)			
For furth	er information concerning this matter, pl	ease call:				
EDUARD	OO GONZALEZ	305 at (477-6969)			
	Name of Person		Area Code & Daytime Telephone Number			
F L F	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
E	Enclosed is a check for the following ar	nount:				
Ī	■ \$25 Filing Fee	□ \$5	55 Filing Fee & Certified Copy			
INHS18 (2/14)					

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. N	lame of the limited liability company:	LDINGS	S, LLC		
2. (a)	8855 COLLINS AVENUE, SUITE # 6J		(b) 8855 CC	LLINS AVENUE, SU	JITE # 6J
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(*)	Mailing address of limi	
	SURFSIDE, FL 33154		SURFSII	DE, FL 33154	···· <u> </u>
			~	-	
	04/28/2004		L0400003	2428	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	ROBLEDO, ANTHONY				
` '	Registered Agent and Registered Office shown on the records of	of the Flo	rida Dept. of Sta	ate:	1.163
	Registered Office Address (MUST BE FLORIDA STREET	T ADDR	ESS)	_	100 125
	3901 NW 79TH AVENUE, SUITE 104		····		ထ်
	DORAL F	L 33166	;)	_	
(b)	FLORIDA CORPORATE REGISTERED AGENTS, LLO	 C.			10
(0)	Enter name of NEW Registered Agent and/or NEW Registere				
	NEW Registered Office Address:			_	
	8323 NW 12 STREET, SUITE 102				
	The state of the s			_	
	DORAL F	33126 L			
cnange agent ' was/w	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members icles of organization of the operating agreement of the	e regist iability of the l	ered office ar company, it i imited liabili	nd the business office is hereby confirmed by company or as oth	e of the registered
	6/3-	E.	DUARDO GO	NZALEZ	
Signa	ture of a member or authorized representative of a member			Printed or typed name	of signee
I here provisi the obl to mer notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	ree 10 a perfor ed for ir hereby	ect in this cap mance of mv a Chapter 602 confirm that	acity. I further agre duties, and I am fam 5, F.S. Or. if this doc the limited liability o	e to comply with the viliar with and accept cument is being filed company has been
Situation	of Registered Agent				