## 10400075682

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## **COVER LETTER**

	istration Section ision of Corporations					
SUBJECT:	TW Realty, LLC					
00201011	Name of Limited Liability Company					
Dear Sir or I	Madam:					
The encloses	d Registered Agent/Registered Office	Change and	fee(s) are submitted for filing.			
Please return	n all correspondence concerning this r	natter to the f	ollowing:			
Tyree F W	/ilson Jr.					
	Name of Person		<del></del>			
TW Realty	, LLC					
	Firm/Company		<del></del>			
120 East (	Granada Blvd.					
	Address		_			
Ormond B	each, FL 32176					
	City/State and Zip Code		_			
tyrarobers	on@ymail.com					
E-mail	address: (to be used for future annual	report notific	cation)			
For further in	nformation concerning this matter, ple	ease call:				
Tyra Robe		386	301-5815			
	Name of Person		Area Code & Daytime Telephone Number			
Regi Divis Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314			
Enclosed is a check for the following amount:						
□ \$2	25 Filing Fee	□ \$55	Filing Fee & Certified Copy			
INHS18 (2/14 <sub>)</sub>	)					

## 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.	Na	me of the limited liability company: TW Realty, LL	.C			···
2.	(a)		(	h)		
	,,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ '	·	Mailing address of limited (Note: MAY BE POST	liability company:
		120 East Granada Blvd		120 E	East Granada Blvd	
		Ormond Beach, FL 32176	_	Ormo	ond Beach, FL 32176	
		10/19/2004		L0400	0075682	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	Tyree F Wilson Jr.				
		Registered Agent and Registered Office shown on the records of the Registered Office Address  (MUST BE FLORIDA STREET A 115 East Granada Blvd Suite 12			State:	
		Ormond Beach	32176			
		, FL	52170			<b>7</b>
1	(b)	Tyree F Wilson Jr.			79 (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	JUN 2
	. ,	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		
		NEW Registered Office Address:		-		ු දා න
		120 East Granada Blvd				਼ ਨੌ
		Ormond Beach , FL	32176			
the age was the Si I he prothe to motif	char nt w /we artic gnatu ereb visio obli nere fira	mited liability company is not organized under the law age or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of eles of organization or the operating agreement of the lare of a member or authorized epresentative of a member by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete payrons of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and complete payrons of my position as registered office address, I have the proper and complete payrons of my position as registered office address, I have the proper and complete payrons of my position as registered office address, I have the proper and complete payrons of my position as registered office address, I have the proper and complete payrons of my position as registered office address, I have the proper and complete payrons of my position as registered office address, I have the proper and complete payrons of my position as registered office address, I have the proper and complete payrons of my position as registered of the proper and complete payrons of my position as registered agent as provided the proper and complete payrons of my position as registered agent and payrons of my position as registered agent as provided the proper and complete payrons of my position as registered agent as provided the proper and payrons of my position as registered agent as provided the proper and payrons of my position as registered agent as provided the proper and payrons are payrons of my position as registered agent as provided the proper and payrons are payrons as a payron and payrons are payrons as a payron and payron as a payron and payron are payron as a payron and payron as a	the regineration in the limited	stered of ompany, nited liab liability of a W. Ro	fice and the business officit is hereby confirmed the bility company or as other company.  Oberson  Printed or typed name of secondarity. I further garee.	ce of the registered at the change(s) wise provided in signee
		Division of Corporations • P.O. Bo	ox 6327	7● Tallal	hassee, FL 32314	

FILING FEE: \$25.00