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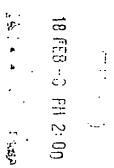
(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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COVER LETTER

	Registration Section Division of Corporations								
SUBJE	T.B.T.,LLC								
3000	Name of Limited Liability Company								
Dear Sir	or Madam:								
The enc	losed Registered Agent/Registered Off	ce Change and f	ee(s) are submitted for filing.						
Please re	eturn all correspondence concerning the	is matter to the fo	ollowing:						
RICHA	ARÐ TOPPINO								
	Name of Person		_						
	Firm/Company		_						
P.O. B	OX 787								
	Address								
KEY V	VEST, FL 33041-0787								
	City/State and Zip Code		_						
ASHLE	EYP@CHARLEYTOPPINO.COM	1							
E-1	mail address: (to be used for future ann	ual report notific	ration)						
For furth	ner information concerning this matter.	please call:							
RICHA	RD TOPPINO	305	296-5606						
	Name of Person		Area Code & Daytime Telephone Number						
ı	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Divi P.O.	ILING ADDRESS: Istration Section sion of Corporations Box 6327 ahassee, Florida 32314						
	Enclosed is a check for the following amount:								
į	2 \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy						

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	ime of the limited liability company: T.B.T., LLC		 				
	(a)		(t	o)				
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		#33 CALLE UNO, ROCKLAND KEY		#33 CA	LLE UNO, ROCKLAND KEY			
		KEY WEST, FL 33040		KEY WEST, FL 33040				
		NET WEST, 12 33040		ES1, FE 33040				
		12/21/2004		L040000	92175			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	HUGHES, ERICA A						
••	(4)	Registered Agent and Registered Office shown on the records o	te:					
					_			
		Registered Office Address (MUST BE FLORIDA STREET	<u>D</u>					
		500 FLEMING STREET			در			
		KEY WEST	_L 33040					
		· · · · · · · · · · · · · · · · · · ·						
	(b)							
	Enter name of NEW Registered Agent and/or NEW Registered Office a			<u>dress</u> :				
		NEW Registered Office Address:						
		#33 CALLE UNO, ROCKLAND KEY			* ;			
		KEY WEST	_33040					
		, F	L_33040		_			
the ag wa	: cha ent v is/we	mited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members desor organization or the operating agreement of the	of the reginability control of the limited in the l	stered offic- ompany, it i lited liabilit liability cor	e and the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in			
- 5	Signature of a member or authorized representative of a member				Printed or typed name of signee			
protito no	ovisi v obl. mere v pec	by accept the appointment as registered agent and as ons of all statutes relative to the proper and completing igations of my position as registered agent as providely reflect a change in the registered office address, if inwriting of this change.	ree to act e perform ed for in (hereby c	in this cap ance of my Thapter 602 onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been			