## 105000080460

| (Re                     | questor's Name)    |             |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             |             |
| bA)                     | dress)             |             |
| -<br>(Cit               | ry/State/Zip/Phone | e #)        |
| PICK-UP                 | WAIT               | MAIL        |
| (Bu                     | siness Entity Nar  | ne)         |
| (Do                     | cument Number)     |             |
| Certified Copies        | _ Certificates     | s of Status |
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TALLAHASSEC, FLORIDA

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J. SAULSBERRY EXAMINER DEC 1 2010

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |  |  |  |
|---|--|--|--|
| SUBJECT: JAS 863 LL C Name of Corporation   |  |  |  |
| DOCUMENT NUMBER: LO500080460  |  |  |  |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.   |  |  |  |
| Please return all correspondence concerning this matter to the following:   |  |  |  |
| Please return all correspondence concerning this matter to the following: $ \frac{SUSan}{Name \text{ of Contact Person}} $ The second |  |  |  |
| TAS 863 LLC Firm/Company  |  |  |  |
| 605 Lincoln Rd-Suite 240<br>Address   |  |  |  |
| Miami Bch FL 3313 9<br>City/State and Zip Code  |  |  |  |
| E-mail address: (to be used for future annual report notification)  |  |  |  |
| For further information concerning this matter, please call:  |  |  |  |
| Susan Tiffan at 305 535 f f  Name of Contact Person at Code & Daytime Telephone Number  |  |  |  |
| Enclosed is a \$35.00 check made payable to the Department of State.  |  |  |  |
| Mailing Address: Amendment Section  Street Address: Amendment Section   |  |  |  |

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

## 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.

| 863 46   |
|--|
| 605 Lincoln Rd #240  |
| Miani Bu FL 35139  |
| · (  |
| L05000080460   |
| . Document number  |
| e records of the Florida Dept. of State:   |
| Susan Tiffan/  |
| SUSAN Tiffan/<br>107 Lincoln Rd Suk 24<br>Miami Beach FL 33139   |
| Registered Office address:  Susan Tiffany  |
| Susan Tittany<br>bos Lincoln Rd Suite 240<br>Miami: Buch ,FL 33139   |
| ws of the State of Florida, it is hereby rida street address of the registered office al. Or, in the case of a Florida limited was/were authorized by an affirmative vote ise provided in the articles of organization  The case of a Florida limited was/were authorized by an affirmative vote ise provided in the articles of organization  The case of a Florida limited was/were authorized by an affirmative vote is provided in the registered of my duties, the registered agent as provided for in ly reflect a change in the registered office is been notified in writing of this change. |
|  |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00