106000011015

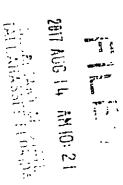
(Red	questor's Name)		
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PICK-UP	☐ WAIT	MAIL	
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(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



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15 2017 1. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TZ, LLC		
Name	e of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Bryan Grosman		
Name of Person		
TZ, LLC		
Firm/Company		
315 North Federal Highway		
Address		
Hollywood, Florida 33020		
City/State and Zip Code		
ev@brycorholdings.com		
E-mail address: (to be used for future annu	ual report notification)	
For further information concerning this matter,	please call:	
Bryan Grosman	954 458-2826	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	amount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	
INHS18 (2/14)		



August 3, 2017

BRYAN GROSMAN 315 NORTH FEDERAL HIGHWAY HOLLYWOOD, FL 33020

SUBJECT: TZ, LLC

Ref. Number: L06000011015

We have received your document for TZ, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 117A00015768



2017 AUG 14 AH 10: 21

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.

a)	(b)			
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
408 SE 17th Ave	408 S	408 SE 17th Ave		
Fort Lauderdale, FL 33301	Fort Lauderdale, FL 33301			
01/31/2006	L06000	L06000011015		
Date of filing/registration in Florida	4.	Document n	umber	
· (a)				
(a)	of the Florida Dept, of S	 State:		
GROSMAN, BRYAN M. ESQ.	·			
Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)			
1051 NW 3rd Street				
			<i>=₁</i> ८ ३	
Hallandale , I	_{.L} 33009			
			ALIG ALIG	
Enter name of NEW Registered Agent and/or NEW Registered			200	
Enter name of NEW Registered Agent and/or NEW Register	ed Office address:		27 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
11			***	
	Evices.		10: 21	
NEW Registered-Office Address:			3/2	
315 North Federal Highway		·		
Hollywood .	33020			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,			
e limited liability company is not organized under the l	aws of the State of	Florida, it is he	reby confirmed that after	
change or changes are made, the Florida street address	of the registered off	fice and the bus	iness office of the registe	
nt will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members	of the limited liabi	ility company of	r as otherwise provided in	
articles/edorganization or the operating agreement of the	ne limited liability c	ompany.		
1 (1997)	Bryan Grosman			
nuture of a member or authorized representative of a member	Printed or typed name of signee			

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

gistered Agent