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T. HAMPTON

APR 2 1 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TP Investment Group, LLC (Name of I	Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Eric T. Salpeter, Esq. (Name of Person)		
Salpeter Gitkin, LLP (Firm/Company)		
Museum Plaza - Suite 503, 200 S. Andr	rews Avenue	
(Address)		
Ft. Lauderdale, FL 33301		
(City/State and Zip Code)		
For further information concerning this matter	er, please call:	
Eric T. Salpeter, Esq.	at (954) 467-8622	
(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 followin	g amount:	
✓ \$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 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.

1. The name of the limi	ted liability company is: TP Inves	tment Group, LLC		
2. The mailing address	of the limited liability company is	S : 2909 S. Andrews Ave.,		·
Ft. Lauderdale, FL 33316				
March 17, 2006		L06000028544		
		4. Document number		
5. The name of the regis Florida Department o	stered agent and the registered off f State:	ice address as shown on the reco	rds of the	e
	Salpeter, Eric			
	Name			
	4000 Hollywood Boulevard, #	675-South		gerteral .
Address Hollywood, FL 33021			0	NID S
	City, State and	l Zip	APR	OIST SECH
6. The name and address of the new registered agent and/or office:			R 18	PARTIE
	Eric T. Salpeter, Esq.		P	
Name			PH 12: 02	82
Museum Plaza - Suite 503, 200 S. Andrews Avenue		0 S. Andrews Avenue	<u></u>	
	Florida street address (P.O. Be	ox NOT acceptable)	2	IONS IE
		3301		
	City, State and 2	Zip		
confirmed that after the and the business office of liability company, it is hof the members of the li or the operating agreement.	empany is not organized under the change or changes are made, the lof the registered agent will be ider ereby confirmed that the change (imited liability company or as other of the limited liability company or as other of the limited liability company.	Florida street address of the regis atical. Or, in the case of a Florid b) was/were authorized by an aff	stered off a limited irmative	vote
Eric T. Salpeter, Esq.		_		
(Printed or typed name of signed I hereby accept the appearant of the provision and I am familiar with a Chapter 608, F.S. Or, if address, I hereby confirm	c) cointment as registered agent and instant of all statutes relative to the pind accept the obligations of my pind accept the obligations of my pind document is being filed to me that the limited liability company.	agree to act in this capacity. I fur oper and complete performance osition as registered agent as pro erely reflect a change in the regi ny has been notified in writing of	arther ag of my di ovided fo stered of this cha	ree to uties, or in fice nge.

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