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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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Certified Copies Certificates of Status						
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Special Instructions to Filing Officer:

A. LUNT

DEC. 1 6 2010

EXAMINER

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COVER LETTER

Division of Corp	orations					
SUBJECT:	55	5 TAN	GO TA	NGO LI	LC	
<u>-</u>	Name o	f Limited	d Liabilit	ty Compa	ny	
Dear Sir or Madam:						
The enclosed Registered	l Agent/Registered	d Office (Change a	and fee(s)	are submitted	for filing.
Please return all corresp	ondence concerni	ng this m	atter to t	the follow	ing:	
ALLAN	I B ANDREASEI	N		_		
N	ame of Person					₽. ≥
						2010 DEC 15 SECRETARY TALLAHASSE
555 TAI	NGO TANGO LL	.C				
	rm/Company			-		AND THE STREET
5517 V	'AN DYKE ROAL	ס				产品
	Address			_		PN J: 21 OF SIMIE C-FLORIE
						電流 29
111	TZ, FL 33558					
	tate and Zip Code			_		
·	•					
bleathers@to	talgolfconstructi	on.com				
bleathers@to E-mail address: (to be use	d for future annual repo	rt notification	on)	-		
For further information	concerning this m	atter, ple	ase call:			
ALLAN B AN	DREASEN	at (_		_)	493-882	
Name of Per	son		A	rea Code &	Daytime Telephone	Number
STREET/COUR	IER ADDRESS:		MAI	LING AD	DRESS:	
Registration Section				stration Se		
Division of Corpo	rations			sion of Cor	porations	
Clifton Building	anton Cival-		•	Box 6327	owido 20214	
2661 Executive Co Tallahassee, Florid			lana	inassee, Fi	orida 32314	
Enclosed is a ch	eck for the follow	ving amo	ount:			
\$25 Filing Fed	2		\$55	Filing Fe	ee & Certified	Сору

TO: Registration Section

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. Name of the limited liability company:	555 TANGO TANGO LLC				
2. (a) Principal office address of limited liability compa	any:				
(Note: MUST BE STREET ADDRESS)	3925 MOORES LAKE ROAD DOVER, FL 33527				
(b) Mailing address of limited liability company:					
(Note: MAY BE POST OFFICE BOX)	3925 MOORES LAKE ROAD DOVER, FL 33527				
08/20/2007	L07000085199				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:				
Registered Agent:	ALLAN B ANDREASEN				
Registered Office Address:	3925 MOORES LAKE ROAD DOVER, FL 33527				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRESS)</u>	EW Registered Office address 5517 VAN DYKE ROAD LUTZ 7 33558				
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member JEFF BREWSTER Frinted or typed name of signee	the laws of the State of Florida, it is hereby to Florida street address of the registered office centical. Or, in the case of a Florida limited				
	I garee to get in this eangeity. I further gaves to				
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my in Chapter 608, F.S. Or, if this document is being filed to in address, I hereby confirm that the limited liability company.	ragree to act in this capacity. I juriner agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.				
Signature of Registered Agent					

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