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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
ALLAHASSEE, FLORID

A. LUNT

JUN 17 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TIP Recelty, U	mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
Charles Hower Name of Person		
TIP Realty LLC Firm/Company	7 . 28	
Firm/Company	CE CO JU	-1
10255 SW 30 street	SECRETAR) ALLAHASSI	
Address	AH 9: EE. FLOR	П
Miami, FL. 33165 City/State and Zip Code	Lorie Sia 9.	
	_	
ChuckHoov Cyahov. E-mail address: (to be used for future annual report not		
For further information concerning this matter	r, please call:	
Watherine Name of Person	at (1800) 241 - 9507 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	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.

agent, or both, in the state of Prortac.	
1. Name of the limited liability company:	ily, LC
2. (a) Principal office address of limited liability company	y: TIP Realty, LLC
(Note: MUST BE STREET ADDRESS)	1101 Sw 122 Ave # 207 Mami, FL. 33184
(b) Mailing address of limited liability company:	TIP Realty, UC
(Note: MAY BE POST OFFICE BOX)	2043 york Street Denver, CO 80205
10/01/2007	L0700099770
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida De For State:
Registered Agent:	charles Hoover 5 5
Registered Office Address:	1025550 30 5 9 3 miami, fl 331 8 4
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1101 Sw 122 Ave # 207
	miami ,FL 3318
If the limited liability company is not organized under the	laws of the State of Florida, it is hereby

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

	J
	Printed or typed name of signee
_	I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statules relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hareby confirm that the limited liability company 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

Signature of a member or authorized representative of a member