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COVER LETTER

Division of Corporations				
SUBJECT: Tenant	Evaluation LLC			
Name of Limited Liability Company				
Dear Sir or Madam:	•			
The enclosed Registered Agent/Registered Office	c Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Luis Teran	•			
Name of Person	· ·			
Tenant Evaluation LLC				
Firm/Company	***************************************			
• •				
11606 City Hall Promenade Suite 20 Address	<u>3</u>			
·······································				
Miramar, Florida 33025	orange (Maliferna and Angele A			
City/State and Zip Code				
Luis@tenantevaluation.com E-mail address: (to be used for future annual report notifice	tion)			
2 man dealess. (to be used for raine annual report norme				
For further information concerning this matter, please call:				
Luis Teran at (305) 692-7900			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section Division of Corporations	Registration Section Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301	rananassee, rionda 32314			
Enclosed is a check for the following 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.	Name o	of the limited liability company:	Tenant Evaluation LLC
2.	(a) Prir	ncipal office address of limited liability company	11606 City Hall Promenade
	(<u>N</u>	lote: MUST BE STREET ADDRESS)	Suite 203 Miramar, Florida 33025
	(b) Ma	iling address of limited liability company:	11606 City Hall Promenade
	(<u>N</u>	ote: MAY BE POST OFFICE BOX)	Suite 203 Miramar, Florida 33025
		.12/05/2007	L07000120931
3.	Date of	filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept.			
	Re	gistered Agent:	<u>Luis Teran</u>
	Re	gistered Office Address:	18851 NE 29 Avenue
			Suite 710 Aventura, Florida 33180
	<u>NE</u> NE	ter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>CW</u> Registered Agent: <u>CW</u> Registered Office Address:	11606 City Hall Promenade
	. <u>(M</u>	<u>UST BE FLORIDA STREET ADDRESS)</u>	Suite 203 Miramar ,FL 33025
co an lia of or Sig	nfirmed d the but bility control the men the open hature of a inted or type	ted liability company is not organized under the that after the change or changes are made, the F siness office of the registered agent will be ident ompany, it is hereby confirmed that the change(s) inbers of the limited liability company or as other rating agreement of the limited liability company or member or authorized representative of a member Luis Teran The decept the appointment as registered agent and a change of the provisions of all statutes relative to the production of the provision of the provision of the provision of all statutes relative to the proving with and accept the obligations of my pools. F.S. Or, if this document is being filed to me hereby confirm that the limited liability company	aws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.
Si	gnature of	Registered Agent	′′

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