## L08000092035

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TALLAHASSEF FLOORS

C. LEWIS

APR 1 9 2013

EXAMINER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: April 16, 2013

Order#: 606298/032

Re: TBSA 3, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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: TBSA 3, LLC		·
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	26th Floor	
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	Miami, FL 33131	SECRETAL SECRETARY
09/29/2008	L08000092035	SSEE PL
3. Date of filing/registration in Florida	4. Document number	- ST. F.
5. (a) Registered Agent and Registered Office shown	on the records of the Florid	a Dept. of State.
Registered Agent:	Jones Walker	
Registered Office Address:	201 S. Biscayne Blvd. 26th Floor Miami, FL 33131	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>		
NEW Registered Agent:	Corporation Service Cor	mpany
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassee	,FL <u>32301</u>
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 id liability company, it is hereby confirmed that the change 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	e Florida street address of the entical. Or, in the case of a ce(s) was/were authorized by twise provided in the article.	he registered office Florida limited
Dona Priebe, Authorized Person Printed or typed name of signee		
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capac proper and complete perfo position as registered agei merely reflect a change in any has been notified in wi	city. I further agree to ermance of my duties, nt as provided for in the registered office citing of this change.
By: Signature of Register Park Spent Corporation Service Company		
Division of Corporations P.O. Box		
TAIVISHOO OUU OEUNEZHOUS PUL BAY	-DOZZ INHNONSSEE MI. SZ	7 7 1 44

**FILING FEE: \$25.00**