L09000046903

Division of Corporations

Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A.
Account Number : 076424003301
Phone : (813)223-7474
Fax Number : (813)227-0435

09-2438 HSg

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: tgood@trenam.com

LLC REGISTERED AGENT CHANGE
620 EAST TWIGGS, LLC

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B. BOSTICK
JUL 22 2013
EXAMINER

* * * COMMUNICATION RESULT REPORT (JUL. 8. 2013 3:09PM) * * *

FAX HEADER 1: TRENAM KEMKER
FAX HEADER 2:

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((H13000152791 3)))

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: 620 East Twiggs, LLC

2. (a) Principal office address of limited liability company: 620 East Twiggs Street, Tampa, Florida 33602
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 620 East Twiggs Street, Tampa, Florida 33602
(Note: MAY BE POST OFFICE BOX)

May 13, 2009
3. Date of filing/registration in Florida

L09000046503
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Liu Property Management, Inc.

Registered Office Address: 4907 Bayshore Boulevard, #104, Tapa, Florida 33611

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: TK Registered Agent, Inc.

NEW Registered Office Address: 101 E. Kennedy Boulevard, Suite 2700, Tampa, FL 33602
(MUST BE FLORIDA STREET ADDRESS)

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.

Signature of a member or authorized representative of a member

Michael K. Ferris, Manager
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 statutes 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 hereby confirm that the limited liability company has been notified in writing of this change.

TK Registered Agent, Inc.
By:
Signature of Registered Agent

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