L09000/18249

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL .						
(Bu	isiness Entity Nar	ne)						
(Do	cument Number)							
Certified Copies Certificates of Status								
Special Instructions to	Filing Officer:							
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Office Use Only



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SECRETARY SECRET

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C. CARROTHERS

COVER LETTER

Division of Corporations		
TULIP PARTNERS, LLC		
	me of Limited Liab	nility Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	fice Change and fe	e(s) are submitted for filing.
Please return all correspondence concerning the	his matter to the fo	llowing:
ABDUR RASHID CHAUDHRY		
Name of Person		-
TULIP PARTNERS, LLC		
Firm/Company		-
13111 CURVED IRON ROAD		
Address		_
HERNDON, VA 20171		
City/State and Zip Code		-
archaudhry@gmail.com		
E-mail address: (to be used for future an	inual report notific	ation)
For further information concerning this matter	r, please call:	
Abdur Rashid Chaudhry	202 at (460-1957
Name of Person	N. T.	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314
Enclosed is a check for the followin	ig 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 605.0114 or 605.0116, 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,	Na	me of the limited liability company: TULIP PARTI	NERS,	LLC				
`		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
		1900 SE, Federal Highway		13111 C	urved Iron I	•		
		Stuart, FL 34994		Herndon,	, VA 20171			
		12/10/2009		L0900011	8249			
3.		Date of filing/registration in Florida	4.		Document nu	ımber		
5.	(a)							
2. (u)	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State. GUERAMI, AMIR			:		15 Jan 26	6 (60%)
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 3000 NW 42ND AVENUE						
		107B, COCONUT CREEK	33066			[6	\$ - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -
(b)	<i>a</i> >	DAN KEEN				H ID: 59	Land.	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:					S	
		NORTHWEST REGISTERED AGENT LLC						
		NEW Registered Office Address:						
		3030 N. Rocky Point Drive, STE 150A						
		Tampa , FL	33607	,				
the age wa	cha ent v s/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	s of the the region of the lin	State of Flo stered office ompany, it is nited liability liability com	and the busing hereby confined company or	ness officirmed that	e of the c	he registere hange(s)
S	igna	ture of a member or authorized representative of a member			Printed or type	d name of s	ignee	
pro the to i	ovisi obl nere	by accept the appointment as registered agent and agroons of all statutes relative to the proper and complete in ignitions of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered of the change in	ee to ac perform I for in (pereby c	t in this capa ance of my a Chapter 605, onfirm that t	icity. I furthe lutics, and I a F.S. Or, if t he limited lia	er agree t im familie his docum ibility com	o com ar witi nent is npany	ply with the h and accep s being filed has been
Sig	mater	re of Registered Agent	Dan K	een -	Manage	er		