

11000026727

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J. BRYAN

OCT -7 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TIGER ASSONAME of Lim	ociates Luc nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
PALLAN KATGARA Name of Person	
TIGER ASSOCIATES L	
Firm/Company 17570 GLAND ESTE (Address	ること
BOCA RATON FL 33 City/State and Zip Code	496
P. Ratgava (a) A. Mail. E-mail address: (to be pred for future analysis report notifications)	
For further information concerning this matter,	please call:
CAROL KATGARA a Name of Person	t (
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	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 of the limited liability company:	ASSOCIATES LLC
2. (a) Principal office address of limited liability company:	3400 S.OCEANBLYDA
(Note: MUST BE STREET ADDRESS)	HIGHLAND BEACH, FL 33487
(b) Mailing address of limited liability company:	sane to the
(Note: MAY BE POST OFFICE BOX)	
MARCH 3, 2011	L 11000026727
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on the	
Registered Agent:	PALLAN KATGARA
Registered Office Address:	3400 S. OCEAN BLUD # 9B MICHLAND BEACH FL 33427
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	BOLA RATON FL 33496
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote
PALLAN KATGARA	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	