## L12 0000 41706

(R	equestor's Name)	<u> </u>					
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	ity/State/Zip/Phor	ne #)					
	WAIT	<u> </u>					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificate	es of Status					
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SECRETARY OF STATE TALLAHASSEE FLORIDA

OCT 29 2015 J SHIVERS



CSC - WILMINGTON
Suite 400

2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: October 26, 2015

Order#: 831724/036

Re: TS MANAGER, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25\_\_\_.

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:Janis M. Smith 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 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: TS MANAGER	, LLC				
2.	(a)	19950 West Country Club Drive	(b)	19950 West Cou	untry Club Drive		
_,	(=)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	Mailing add	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Suite 800	Sı	Suite 800			
		Aventura FL 33180	<u>_A</u>	ventura	FL	33180	
		03/23/2012	L1:	2000041706		_	
3.		Date of filing/registration in Florida	4.	Docume	nt number		
5.	(a)	Eberline, Randall					
٠.	(4)	Registered Agent and Registered Office shown on the records of	the Florida Dept	. of State:	TAT		
		19950 West Country Club Drive			15 (EC)		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			OCT 28 RETAR		
(		Suite 800		<u> </u>	~	į.	
		Aventura , FL	33180				
					<u>₹</u> \$> <b>८</b>	,n	
	(b)	Corporation Service Company					
		Enter name of NEW Registered Agent and/or NEW Registered	l Office address:				
		1201 Hays Street					
		NEW Registered Office Address:					
		Tallahassee Fi	, 32301				
			_ 32301				
the age wa	cha: ent w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members of the of organization for the operating agreement of the	f the registered ability compa of the limited	d office and the l ny, it is hereby o liability compan	business office o	f the registered e change(s)	
P١	12/	In de Fre		aren, Authorize	d Person		
PZ	ignat	ure of a member or authorized representative of a member	7411010101		typed name of signe	ee	
pro the to 1	ovisio obli mere	y accept the appointment as registered agent and agrows of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I in writing of this change.	performance d for in Chapa hereby confiri	of my duties, ån ter 605, F.S. Or n that the limite	d I am familiar v ; if this documen d liability compa	vith and accept it is being filed iny has been	
Sic	natur	e of Registered Agent Corneration Company	BV. Cross	E Virby Again	ctant Vian Braci	done	

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

INHS18 (2/14)