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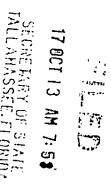
(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
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## **COVER LETTER**

INHS18 (2/14)

TO: Registration Section Division of Corporations		
SUBJECT: Courty Tunchen LLC Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Mathew Nall Name of Person		
Citter Courty Juchin L/C Firm/Company		
10055 W. Hills Borough Ave.		
Tampa F-L 336/5 City/State and Zip Code		
Ma Ha Superfet H. com  E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
M#hw N. U at (502 ) 500 · 10 3 3		
Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section		
Division of Corporations  Division of Corporations		
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314		
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 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. Name of the limited liability company: Criffor Cou	nty Junction, LLC
2. (a) 10055 U. Hills borough Ave. (b)	10055 W. Hilsborrugh Ave.
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Taypa, FL 33615	Tampa, 1-6 33615
	1 )
5-31-12	L12000072604
3. Date of filing/registration in Florida 4.	Document number
5. (a) United States Corporation Agen	to Int
Registered Agent and Registered Office shown of the records of the Fforida	Dept. of State:
13302 Winding O.15 Ct.	
Registered Office Address MUST BE FLORIDA STREET ADDRESS)	(O
A	SSX CO FILE
Tump. FL 33	615 PAR TM
(b) Malthew Nall	7: 5:8 CORID
Enter name of NEW Registered Agent and/or NEW Registered Office add	
6016 Santa Monica NEW Registered Office Address:	Di.
Tanpa, FL 33	<b>6</b> 15
If the limited liability company is not organized under the laws of the S	State of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of the regist agent will be identical. Or, in the case of a Florida limited liability con	ered office and the husiness office of the registered.
was/were authorized by an attirmative vote of the members of the limit	ted liability company or as otherwise provided in
the articles of organization on the operating agreement of the limited lia	ability company
Signature of a member or authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to act i provisions of all statutes relative to the proper and complete performation of my position as registered agent as provided for in Cl to merely reflect a change in the registered office address, I hereby connotified inverting of this change	n this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept papter 605, F.S. Or, if this document is being filed afirm that the limited liability company has been
Signature of Registered Agent	