

2/2000/44771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

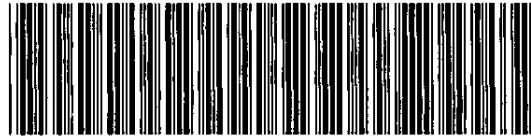
Special Instructions to Filing Officer:

A. LUNT

NOV 28 2012

EXAMINER

Office Use Only



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11/26/12--01007--017 **25.00

FILED
2012 MAY 26 PM 5:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**TSY PROPERTY MANAGEMENT
6810 N. ST ANDREWS DR.
HIALEAH, FL 33015 - USA**

Registration Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

To Whom It May Concern:

On November 15, 2012 TSY PROPERTY MANAGEMENT has filed electronically the Articles of Organization and was assigned a document number L12000144771.

We found a typo on the building number enter at the time of registration. The following addresses must changed to 6810 not 6180:

- The street address of the principal office of the LLC;
- The mailing address of the LLC;
- The Florida street address of the registered agent;

For the three mentioned addresses mentioned above the addresses should be read as is:

6810 N. St Andrews Drive
Hialeah, FL 33015

Please find enclosed the form INHS18 filled in properly and signed.

Thank you for your assistance in this matter.

Sincerely



Thierry SPARFEL
Member/Owner

2012 NOV 26 PM 5:02
TALLAHASSEE, FLORIDA
RECEIVED
DIVISION OF CORPORATIONS
STATE OF FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TSY PROPERTY MANAGEMENT, 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:

M. THIERRY SPARFEL

Name of Person

TSY PROPERTY MANAGEMENT, LLC

Firm/Company

6810 N. ST ANDREWS DRIVE

Address

HIALEAH, FL 33015

City/State and Zip Code

thierry.sparfel@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THIERRY SPARFEL

305 491-1496
at ()

Name of Person

Area Code & Daytime Telephone Number

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

FILED
2012 MAY 26 PM 5:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: TSY PROPERTY MANAGEMENT, LLC

2. (a) Principal office address of limited liability company: 6810 N. ST ANDREWS DRIVE
HIALEAH, FL 33015
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 6810 N. ST ANDREWS DRIVE
HIALEAH, FL 33015
(Note: MAY BE POST OFFICE BOX)

NOVEMBER 15, 2012

L12000144771

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent:

THIERRY SPARFEL

Registered Office Address:

6180 N. ST ANDREWS DRIVE
HIALEAH, FL 33015

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

NEW Registered Agent:

THIERRY SPARFEL

NEW Registered Office Address:

6810 N. ST ANDREWS DRIVE

(MUST BE FLORIDA STREET ADDRESS)

HIALEAH, FL 33015

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

Thierry SPARFEL
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.


Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00