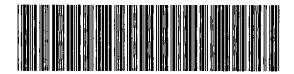
## L1300005a354

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	_ y/State/Zip/Phone	· #)
·		•
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
/Do	cument Number)	
(50	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900273842979

06/15/15--01005--009 \*\*25.00

FILED 15 JUN 15 AM 9: 38

J. HARFEIE

## COVER LETTER

TO: Registration Section

Division of Corporations				
TSG VERO RE #1 LLC	TSG VERO RE #1 LLC .			
SUBJECT: Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
DAVID E SOMMERFELD				
Name of Person	——————————————————————————————————————			
TSG VERO RE #1 LLC				
Firm/Company				
290 OLD DIXIE HIGHWAY				
Address				
VERO BEACH, FL 32962	3. <sup>14</sup> .			
City/State and Zip Code				
DAVIDS5563@CS.COM				
E-mail address: (to be used for future annual	report notification)			
For further information concerning this matter, plea	ase call:			
DAVID E SOMMERFELD	772 562-8306			
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 am	ount:			
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18 (2/14)				

## 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.					
2. (2	TSG VEDO DE #1110	(b) TSG VERO RE #1 LLC			
_, (,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)				
	290 OLD DIXIE HIGHWAY	290 OLD DIXIE HIGHWAY			
	VERO BEACH, FL 32962	VERO BEACH, FL 32962			
	04/09/2013	L13000052354			
3.	Date of filing/registration in Florida	4. Document number			
5. (	(a)				
	Registered Agent and Registered Office shown on the record	ords of the Florida Dept. of State:			
	THE SOMMERFELD GROUP AND ASS	SOCIATES INC			
	Registered Office Address (MUST BE FLORIDA STRE	32962 55 E			
	VERO BEACH	32962 S 5 E			
(1	(b)Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>				
	THE SOMMERFELD GROUP & ASSOC	CIATES INC			
	NEW Registered Office Address:				
	290 OLD DIXIE HIGHWAY				
	VERO BEACH	_, FL_32962			
the cagen was/	change or changes are made, the Florida street addres nt will be identical. Or, in the case of a Florida limite	• • •	ered )		
	TITE, AMBR	DAVID E SOMMERFELD, TTEE, AMBR			
	gradure of a member or authorized representative of a member	Printed or typed name of signee	41		
prov the o	ereov accept the appointment as registered agent and visions of all statutes relative to the proper and comp obligations of my position as registered agent as pro- nerely reflect a change in the registered office addres fied in writing of this change.	nd agree to act in this capacity. I further agree to comply with aplete performance of my duties, and I am familiar with and ac ovided for in Chapter 605, F.S. Or, if this document is being first, I hereby confirm that the limited liability company has bee	ine cept iled n		

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

Signature of Registered Agent