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#### COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: IEC

TECA, 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:

### JUDY CULVER

Name of Person

#### **CLAS INFORMATION SERVICES**

Firm/Company

2020 HURLEY WAY, STE. 350

Address

SACRAMENTO, CA 95825

City/State and Zip Code

jc@clasinfo.com

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

For further information concerning this matter, please call:

JUDY CULVER

., 800

447-6237

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

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INHS18 (12/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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.

- con, m me crane o, . remain				
Name of the limited liability company: TECA LLC				
2 (a) Principal office address of limited liability company	C/O MARKET STREET REAL ESTATE PA	RTNERS		
<ol> <li>(a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)</li> </ol>	7600 RED ROAD - SUITE 102	THEIRO		
(Note: MUST BE STREET ADDRESS)	MIAMI, FL 33143			
(b) Mailing address of limited liability company:	C/O MARKET STREET REAL ESTATE PA	RTNERS		
(Note: MAY BE POST OFFICE BOX)	7600 RED ROAD - SUITE 102			
(	MIAMI, FL 33143			
05/08/2013	L13000067792			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on Registered Agent:	the records of the Florida Dep	nt. of St	ate:	
			<b>~</b>	
Registered Office Address:	JUDITH KENNEY & ASSOCIATES, P.A.	- ن عو	2014	
	2001 BISCAYNE BLVD SUITE 2620	70.22		-
	MIAMI, FL 33137	-	Æ	<u>_</u> .
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address	- <del> </del>	27 PM 2:	
NEW Registered Office Address:	1200 SOUTH PINE ISLAND ROAD	25	ယ	Manage
(MUST BE FLORIDA STREET ADDRESS)		<del>2</del>	<u> </u>	
(Moor barbons Andrews)	PLANTATION	FL 33	3324	_
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherwithe operating agreement of the limited liability company.	Torida street address of the reg tical. Or, in the case of a Flor ) was/were authorized by an a	gistered ida lim ffirmati	l office ited ive voi	te of
Signature of a member or authorized representative of a member				
ALLAN SERVIANSKY	<del></del>			
Printed or typed name of signee				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 605, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compand	agree to act in this capacity. It is capacity is oper and complete performance of the control of the capacity is select as the capacity in the reput as the capacity has been notified in writing	further ce of m provide gistere of this	r agree ly dutie ed for i ed offic chang	2 to 28, n e e.

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

INHS18 (12/13)

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