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COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: TORI 7 LLC Name of Limited L.	iability 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:
SHYAM SHANKAR Name of Person	
Firm/Company	
1040 BIS CAYNE BUND, APT-1403 Address	
MIAMI, FL 33132 City/State and Zip Code	
Shyan 7 Shankar @ gmail. E-mill address: (to be used for future annual report notif	Cam Tication)
For further information concerning this matter, please call:	
SNYAM SHANKAR at 646 Name of Person) 259 179 6 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
✓ \$25 Filing Fee	55 Filing Fee & Certified Copy
INHS18 (2/14)	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH I LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability comsubmits the following statement in order to change its registered office or registered agent, or both, in the State of Flo

I. Na	me of the limited liability company:	زد		
)	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. (0,	<u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1040 BISCAYNE BLUD, APT-1403		1040	BISCAYNE BLUD , APT - 14
	MIAMI, FL - 33132	-	<u>h</u> i A	41, FL - 33132
	10128/2013	_	43	000151131
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	LUCIANA B CARRARO			
. ,	Registered Agent and Registered Office shown on the records of the	Florida	Dept. of Sta	te:
	1577 BAYROAD + 203			_
	Registered Office Address (MUST BE FLORIDA STREET AD	DRESS)		
				_
	MIAMI BEACH ,FL	3313	59	-
(b)	SHYAM SHANKAR			2021 S
	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	lress:	EP.
	1040 BISCAYNE BLUD, AFT	- 14	0.3	Y O ASSE
	NEW Registered Office Address:			M 9: 32
				9.
			•	~ ~~
	MIAMI ,FL_	3:	5132	<u> </u>
change agent was/we the arti	mited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of teles of organization or the operating agreement of the linguistic of a member of a member of a member of a member of all statutes relative to the proper and complete period of all statutes relative to the proper and complete period of the period of	gistered ility con the limi nited lis	d office are mpany, it is ted liability core SH	and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in pany. YAM SANKAR Printed or typed name of signee Accite: I further agree to comply with
Signatu:	e of Registered Agent			