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JAN 23 2015 T. CARTER

COVER LETTER

TO: Registration Section
Division of Corporations

INHS18 (2/14)

SUBJECT:	TEIS PROPERTIES LLC				
	Name o	f Limited Lia	ability Company		
Dear Sir or N	/ladam:				
The enclosed	Registered Agent/Registered Office	Change and	fee(s) are submitted for filing.		
Please return	all correspondence concerning this m	atter to the f	following:		
TESSI WII	LIAMS				
	Name of Person		_		
TEIS PRO	PERITES LLC				
·	Firm/Company		_		
2109 J LA	WSON BLVD				
	Address		_		
ORLANDO), FL 32824				
	City/State and Zip Code		_		
TESSIRW	ILLIAMS@GMAIL.COM				
E-mail	address: (to be used for future annual	report notific	cation)		
For further in	aformation concerning this matter, ple	ase call:			
DENNIS W	/ILLIAMS	678	964.0994		
	Name of Person		Area Code & Daytime Telephone Number		
Regi: Divis Clifte 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314		
Encl	osed is a check for the following am	ount:			
2 \$2	5 Filing Fee	□ \$55	5 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.	Na	me of the limited liability company: TE	IS PROPER	RTIES	LLC			
2.	(a)	2109 J LAWSON BLVD ORLANDO, FL	32824	(t	2109 J L	AWSON BLVD ORLA	ANDO, F	L 32824
	(-)	Principal office address of limited liabilit (Note: MUST BE STREET ADD)		- (*	/	Mailing address of limited (Note: MAY BE POST	•	• •
3.		01-02-2014 Date of filing/registration in Flo		4.	46-44676	Document number		
5.	(a)	CORPORATION SERVICE COM	PANY					
	(b)	Registered Office Address (MUST BE FLOR 1201 HAYS STREET TALLAHASSEE TESSI R WILLIAMS Enter name of NEW Registered Agent and/or N 2109 J LAWSON BLVD NEW Registered Office Address:	, FL_3	32301		- - -	15 JAN 20 AH 10: 02	SECRETARY OF STATE TALLAHASSEE, FLORIDA
		ORLANDO	, FL_3	32824		_		
the age was the	cha ent w s/we arti- signat merel ovision obli- mere	mited liability company is not organized nge or changes are made, the Florida strevill be identical. Or, in the case of a Flor re authorized by an affirmative vote of the cles of organization of the operating agreement of a member of authorized representative of a company accept the appointment as registered agreement of all statutes relative to the proper of a gations of my position as registered age by reflect a change in the registered officing writing of this change.	eet address of the dida limited liable members of the limember member and agree and agree to the didagness of the limember and agree to the limember agree to th	he reginated in the limited in the l	stered office ompany, it is nited liability liability con SSI R WIL	e and the business of shereby confirmed to y company or as other npany. LIAMS Printed or typed name of a city. I further agree.	fice of the hat the clerwise profisignee	ne registered hange(s) ovided in
Sig	patu	e of Registered Agent						