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SECRETARY OF STATE

D. BRUCE OCT 25 YOU

COVER LETTER

TO: Registration Section Division of Corporations							
THC Ventures 8, LLC							
	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing	g.					
Please return all correspondence concerning th	is matter to the following:						
Edward P. Kelly							
Name of Person	· ·						
Trog Hawley Capital, LLC							
Firm/Company							
501 Village Boulevard, Suite 2		7A.(; 2					
Address		LLAN O					
West Palm Beach, FL 33409		PILEU 2018 OCT 24 A ID 31 SECRETARY OF STATE ALLAHASSEE, FLORIDA					
City/State and Zip Code		E F					
ekelly@troghawley.com							
E-mail address: (to be used for future ann	ual report notification)	3u					
For further information concerning this matter,	please call:	•					
Edward Kelly	561 768-7751						
Name of Person	Area Code & Daytime Tele	ephone 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 Cop	y					

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.	Na	me of the limited liability company: THC Ventures	8, L	LC		
	(a)	501 Village Blvd	(b) 501 Village Blvd			
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. '	(Ο).		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 2			Suite 2	·
		West Palm Beach, FL 33409	-	-	Most Da	alm Beach, FL 33409
		West Faim Beach, FL 33409	-	-		ain beach, i L 33403
		01/21/2014		L	140000	10995
3.		Date of filing/registration in Florida	4.			Document number
5.	(a)	Trog Hawley Capital, LLC				_
	()	Registered Agent and Registered Office shown on the records of the	: Flori	da E	Dept. of Sta	te:
		354 Toney Penna Drive				_
		Registered Office Address (MUST BE FLORIDA STREET AD	DRE.	<u>SS)</u>		=
		Suite 1				
		Jupiter , FL	340	9		FILED 2011 24 A N SECRETARY OF STALLAHASSEE, FL
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				AR 21
	(b)					_ FERRIS
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice s	ıddı	ess:	A CO
		501 Village Blvd				E PLORIDA
		NEW Registered Office Address:				
		Suite 2				_
		West Palm Beach	340	9		_
the agg was the large the to no no	e cha ent v as/wo e arti e arti here ovisi e obli mer otifie	imited liability company is not organized under the lawsing or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabilities of a member or authorized representative of a member by accept the appointment as registered agent and agree in the proper and complete pligations of my position as registered agent as provided left reflect a change in the registered office address, I he din virting of his change.	he repolity the limited All reports to a performance of the contract of the co	gist con imit di lia lia lia lia lia lia lia lia lia li	ered officenpany, it ted liability commends of my hapter 60 after that	re and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. N, MANAGING DIRECTOR OF Printed or typed name of signee Printed or typed name of signee The characteristic of the comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
	l Ro	G Hawley Capital (LC By ADAM RYAN), FILING FE	ox 63 E: \$2	27 25.0	Tallaha	ssee, FL 32314