## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## LLC REGISTERED AGENT CHANGE TERRA 2850 TIGERTAIL INVESTMENTS HOLDINGS, LLC

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Corporate Filing Menu

## 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.	lame of the limited liability company: TERRA 2850		ERTAIL INVESTMENTS HOLDINGS, LLC	
2. (a	2665 S Bayshore Dr, Sulte 1020		(b) 2665 S Bayshore Dr, Suite 1020	
1	Principal affice address of limited liability company: (Note: MUST RESTREET ADDRESS)	•	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Caconut Grave, FL 33133	-	Coconut Grove, FL 33133	
	03/26/2014	-	L14000050460	
3.	Date of filing/registration in Florida	4.	Document number	
5. (E			11.0	
	Registered Agent and Registered Office shown on the records of the 2665 S Bayshore Dr. Ste 1020	B (FIDA)	ida Depl. of State:	
	Registered Office Address (MUST RE FLORIDA STREET AL	DRA	ISO	
			ALSE	<u>-</u>
	Coconut Grove	313	33 <u>A</u> S	2
<b>(</b> b	NRAI Services, Inc.		TAR)	~
ζ-	Errier name of NEW Registered Agent and/or NEW Registered O	files	address:	n
	1200 South Pine Island Road			ب
	NEW Registered Office Address:	-	RIDA	8
	Plantation	332	24	
signit was/\ the as Signit here provide on the one to me	ilimited liability company is not arganized under the laws sange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liability and the identical of the case of a Florida limited liability and the case of a Florida limited liability and the interest of the mambers of the liability of a member or authorized representative of a member of the liability of a member of all statutes relative to the proper and complete policy allows of all statutes relative to the proper and complete policy allows of any position as registered agent as provided rely reflect a change in the registered office address, I have all insuffing of this change.	the li mited	gistered office and the business office of the registered company, it is hereby confirmed that the change(s) imited liability company or as otherwise provided in d liability company.  ack M. Maag, Authorized Representative  Printed or typed name of signee	