11400066689

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
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COVER LETTER								
TO: Registration Section Division of Corporations								
SUBJECT: TSL SS PROPCO, LLC Name of Limited Liability Company								
iname	of Limited Liability Company							
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this	matter to the following:							
Brian D. Hudson, Esq.								
Name of Person								
Holding Company of The Villages, Inc.								
Firm/Company								
3619 Kiessel Road								
Address								
The Villages, Florida 32163								
City/State and Zip Code								
legalnotices@thevillages.com E-mail address: (to be used for future annu	al report notification)							
For further information concerning this matter, p								
<i>-</i>								
Christi Jacquay	at (352) 753-6612							
Name of Person	Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS: MAILING ADDRESS:								
Registration Section								
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327							
2661 Executive Center Circle								
Tallahassee, Florida 32301								
Enclosed is a check for the following amount:								
2 \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy							

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:			
2.	(a) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) The Villages, Florida 32163		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) The Villages, Florida 32163	
		04/23/2014		L140	00066689
 3. 5. 	(a)	Date of filing/registration in Florida Brian D. Hudson, Esq.	4.		Document number
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1020 Lake Sumter Landing Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			18 J. F.
	The Villages , FL 32162 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 3617 Kiessel Road				LIO PHIZ: 58
		NEW Registered Office Address:			
		The Villages	FL_32163	3	_
the ag wa the I. I prothe to	e cha ent v as/we arti Signal herei ovisi e obl mere	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the united agreement of the accept the appointment as registered agent and constant of all statutes relative to the proper and completing agreement of the proper and completing agreement of the proper and completing agent as provided in writing of this change.	of the regis I liability co rs of the lim the limited I Bria	stered office ompany, it is ited liability iability con an D. Hud	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in impany. dson, Esq. Printed or typed name of signce pacity. I further agree to comply with the
<u>Si</u>	gnatu	re of Registered Agent Brian D. Hudson, Esq.			

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