## L14000075483

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dusiness Entry Name)					
(Document Number)					
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## COVER LETTER

	egistration Section ivision of Corporations				
SUBJECT	TMR Promotions, LLC				
		of Limited Lial	bility Company		
Dear Sir o	r Madam;				
The enclos	sed Registered Agent/Registered Office	Change and fo	ee(s) are submitted for filing.		
Please reti	urn all correspondence concerning this	matter to the fo	offowing:		
Tracey f	Rosa				
	Name of Person		_		
TMR Pro	omotions, LLC				
	Firm/Company				
1408 86	th Ct NW		_		
	Address				
Bradent	on, FL 34209				
	City/State and Zip Code				
•	@yahoo.com		_		
E-ma	ail address: (to be used for future annua	l report notific	ation)		
For further	r information concerning this matter, pl	ease call:			
Miguel F		941 at (	447-5928		
	Name of Person		Area Code & Daytime Telephone Number		
	FREET/COURIER ADDRESS: egistration Section		ILING ADDRESS: stration Section		
	ivision of Corporations		sion of Corporations		
	lifton Building		Box 6327		
	661 Executive Center Circle		nhassee, Florida 32314		
Ta	Jahassee, Florida 32301				
E	nclosed is a check for the following ar	nount:			
<b>2</b>	\$25 Filing Fee	<b>□ \$</b> 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 ogens, or both, in the State of Florida.

1. Na	ame of the limited liability company: TMR Promot	ions. LLC	
2. (a)	TMR Promotions. LLC	(b) TM(	L PROMOTIONS, LLC
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Nate: MAY BE POST OFFICE BOX)
	1408 86th Ct NW	409	x 86th Ct NW
	Bradenton, FL 34209	BRA	DENTON PR 34209
	05/09/2014	L140000	075483
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Tracey M. Rosa		
	Registered Agent and Registered Office shown on the records of  Begistered Office Address (MUST BE FLORIDA STREET)	·	_
	5411 4th Ave Dr NW		- AA 2 11
	Bradenton .FL	_34209	TALLAH
(b)	Tracey M. Rosa		HASSE T
·	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	1 2: 09 F.S.TATE EE.FL
	NEW Registered Office Address:	<del></del>	
	1408 86th Ct NW		_
	Bradenton, FI.	34209	_
the char agent w was/we the artic	mited liability company is not organized under the lawnge or changes are made, the Florida street address of the florida limited line authorized by an affirmative vote of the members of less of organization or the operating agreement of the literal authorized by the literal authorized by an affirmative vote of a member or authorized representative of a member	I the registered office ability company, it of the fimited liabili	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany.
	y accept the appointment as registered agent and agr	eop to not in this cor	.,
provisio the obli to mere	A decept the appointment as registered agent and legions of all statutes relative to the proper and complete gaifans of my position as registered agent as provided by fellect a change in the registered office address, hi in writing of his change.	performance of my d for in Chapter 60.	duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed
Signatur	e of Registered Agent		
/	Division of Corporations P.O. I	Ray 6327a Tallaha	ceno El 22214

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