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SECRETARY OF STATE

D. SCOTT MAR 1 2017

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: I & S INVESTMENT HOLDING	GS, LLC				
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	e Change and	I fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the	following:			
YOSHIMI O. SMITH, ESQ.					
Name of Person		_			
BELLER SMITH, P.L.					
Firm/Company		·····			
2101 NW CORPORATE BLVD, SUITE 3	16				
Address			TALL SEC		
BOCA RATON, FLORIDA 33431			FILED FEB 28 PH 3: 21 FEB 28 PH 3: 21 FEB 28 PH 3: 21		
City/State and Zip Code			SEE BOOK		
ysmith@bellersmith.com			700		
E-mail address: (to be used for future annua	ıl report notif	fication)	高州 2		
For further information concerning this matter, pl	lease call:				
YOSHIMI O. SMITH	561	994-4316	·		
Name of Person		Area Code & Daytime Telepl	hone 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 a	mount:				
\$25 Filing Fee	1 \$	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. N	ame of the limited liability company:	TMEN	T HOLDIN	GS, LLC	
2. (a)	6633 NW 25th TERRACE		(b) 6633 NW 25th TERRACE		
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	BOCA RATON, FLORIDA 33496		BOCA	RATON, FLORIDA 33496	
	02-26-2015	*****	L150000	35085	
3	Date of filing/registration in Florida	- 4.	L 13000C	Document number	
3.	ISRAEL SALAZAR	4.		Document number	
5. (a))		1. 5. 60.		
	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Sta	te:	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRE.	<u>22)</u>	_	
	17643 BOCAIRE WAY				
	BOCA RATON ET	3348	7		
	, FL	- 			
(b)					
(-)	Enter name of NEW Registered Agent and/or NEW Registered	l Office s	ddress:		
				GAR T	
	NEW Devices of Office Address			- 55 2 -	
	NEW Registered Office Address:			LED 28 PM LASSEE, FI	
	6633 NW 25th TERRACE				
	BOCA RATON FI	3349	6	10 3 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
the ch agent was/w the art	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the regality of the limited	e State of F gistered offic company, it mited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. LAZAR	
_	ature of a member or authorized representative of a member			Printed or typed name of signee	
I here provis the ob to men notifie	eby accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ad in writing of this change.	ree to a perfor ed for in hereby	ct in this cap mance of my Chapter 60 confirm that	pacity. I further agree to 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	
Signat	ure of Registered Agenti				

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