15000114020

(Re	questor's Name)		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 16, 2015

GERALD D FIELSTRA 6910 INTERBAY BOULEVARD, APT. 23 TAMPA, FL 33616

SUBJECT: TBAY DEVELOPMENT LLC

Ref. Number: L15000114020

We have received your document for TBAY DEVELOPMENT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 015A00021999

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: They Developme Name of Limi	ted Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter t	o the following:			•
Garald D. Fielstra	· · · · · · · · · · · · · · · · · · ·			
Thay Dorolopment LLC.				
6910 Interbay BlVd apt &	‡ 3 3		15 OCT 30	
Tampa, Fl 33616 City/State and Zip Code			# ::	RECEIVED
E-mail address: (to be used for future annual report	notification)		2	_
For further information concerning this matter, please ca	11:		•	
Gerald D Fielstru at (Area Code & Daytime Telephor	ne Numbe	r	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327			

Enclosed is a check for the following amount:

□ \$25 Filing Fee

2661 Executive Center Circle Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32314

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. Name of the limited liability company: They Development	LLC	
	ess of limited Hability	company:
Tampa, F1 33616 Tampa,	, 1=1, 3	3616
3. Date of filing/registration in Florida 4. Documen	11 40 20 It number	· · · · · · · · · · · · · · · · · · ·
5. (a) Service Company Registered Agent and Registered Office shown on the records of the Florida Dept. of State.		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
Tallahassee		
(b) Gerald D. F. elstra Enter name of NEW Registered Agent and/or NEW Registered Office address: 6910 Interbay Blyd apt #23 NEW Registered Office Address:	2015 OCT 29 P 12: 12 SECRETARY OF STATE CHASSEE, FLORIDA	
Tampa ;FL 33616		
If the limited liability company is not organized under the laws of the State of Florida, it is the change or changes are made, the Florida street address of the registered office and the bagent will be identical. Or, in the case of a Florida limited liability company, it is hereby cowas/were authorized by an affirmative vote of the members of the limited liability company the articles of organization or the operating agreement of the limited liability company.	ousiness office of onfirmed that the	the registered change(s)
Signature of a member or authorized representative of a member Printed or the state of the state	· Fielst r	ά
I have by accept the appointment as registered agent and agree to get in this congging. I for	where agree to no	anh with the
provisions of all statutes relative to the proper and complete performance of my duties, and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, to merely reflect a change in the registered office address, I hereby confirm that the limited provided in writing of this change.	d I am familiar wi , if this document d liability compan	ith and accept is being filed ry has been

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

Signature of Registered Agent