LIS000167654

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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	ame of the limited liability company: TG 2850	MAR	ΥI	INVESTMENTS, LLC
2. (a)		((b) _	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	、		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3310 MARY STREET, SUITE 302		3	3109 GRAND AVENUE #349
	COCONUT GROVE, FL 33133		C	COCONUT GROVE, FL 33133
	10/01/2015		L1	15000167654
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	la De	
	NRAI SERICES, INC.			202
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	1200 S PINE ISLAND RD			
	PLANTATION	. 33324	_	2024 JUN 18 PH 12: 48
	, t	۰L		
(b)				
(/	Enter name of NEW Registered Agent and/or NEW Registered		ddre	ess:
	Corporation Socies Company			
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	T-11-6	00004		
	Tallahassee, F	TL		
change igent v was/we the arti	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited letter authorized by an affirmative vote of the members cles of organization or the operating agreement of the street of the st	e register liability co of the lin	ed o omp nited	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
	Lie E. C.Quie turçof 3 member or authorized representative of a member	JIL	L CI	CILMI, AUTHORIZED PERSON
				Printed or typed name of signee
provisi he obl. o merc iotified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address. I l'in writing of this change.	gree to act e perform ed for in (hereby cl	t in i ance Chaj onfii	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
	Khoza Erkubly re of Registered Agent	GRACE	E. K	KIRBY, ASST. VICE PRESIDENT
Signatu	re of Registered Agent	on ou	·	

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