LI5000197681

(Reques	tor's Name)				
(Address	5)				
(Addres	s)				
(City/Sta	ate/Zip/Phone #)				
, ,					
PICK-UP] WAIT	MAIL			
	- F-14 - M				
(Busine:	ss Entity Name)				
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to Filing	Officer:				

Office Use Only



300315582703

07/10/13--01017--007 **25.00

18 JUL 10 PH 1: 03

K. SALY JUL 20 2018

TO: Registration Section Division of Corporations					
•					
SUBJECT: TSL BV OPCO, LLC					
	of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	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					
Holding Company of The Villages, Inc. Firm/Company	 				
, min 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 annua	l report notification)				
For further information concerning this matter, pl	lease call:				
Christi Jacquay	at (<u>352</u>) <u>753-6612</u>				
Name of Person	Arca Code & Daytime Telephone Number				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
☑ \$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. N	Vame of the limited liability company: TSL BV OPC	O, LLC		<u>.</u>	
2. (a	3619 Kiessel Road	(b)	3619 Kie	ssel Road	
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	ailing address of limited (Note: MAY BE POST	
	The Villages, Florida 32163		The Villa	ges, Florida 3210	63
	11/23/2015		L15000	197687	
3.	Date of filing/registration in Florida	- 4.	Ŧ	Document number	
5. (a	, Brian D. Hudson, Esq.				
J. (c	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:		-0.8
	1020 Lake Sumter Landing				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	!		題門
					of The
	The Miller of	2246	2		FILED PN 1:03
	The Villages , FI	3216	2		
/L					3
(b	Enter name of NEW Registered Agent and/or NEW Registered	d Office add	lress:		<i></i>
	3617 Kiessel Road				
	NEW Registered Office Address:				
	The Villages , Fi	L_32163	<u> </u>		
16.4-				da d	Command above to the
the cl	limited liability company is not organized under the la nange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li	f the regis iability co	tered office mpany, it is	and the business off hereby confirmed th	ice of the registered nat the change(s)
	were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the				rwise provided in
			ın D. Huds	_	
Sign	nature of a member or authorized representative of a member			Printed or typed name of	f signee
provi the o to me	reby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide wely reflect a change in the registered office address, I ded in writing of this change.	ree to act performed for in C hereby co	in this capa ince of my d Thapter 605, infirm that ti	city. I further agree uties, and I am fami F.S. Or, if this doc he limited liability c	to comply with the liar with and accept ument is being filed ompany has been
Signa	ture of Registered Agent Brian D. Hudson, Esq.				

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