

| (Re                                     | questor's Name)  |             |  |  |
|---|------------------|-------------|--|--|
| , (Ad                                   | dress)           |             |  |  |
| (Ad                                     | ldress)          |             |  |  |
| (Cit                                    | y/State/Zip/Phon | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT           | MAIL        |  |  |
| (Business Entity Name)                  |                  |             |  |  |
| (Document Number)                       |                  |             |  |  |
| Certified Copies                        | _ Certificate    | s of Status |  |  |
| Special Instructions to Filing Officer: |                  |             |  |  |
|   |                  |             |  |  |
|   |                  |             |  |  |
|   |                  |             |  |  |
|   |                  |             |  |  |
|   |                  |             |  |  |

Office Use Only



300282620763

03/04/16--01017--009 \*\*25.00

SECRETARY OF STATE TALLAHASSEE. FLORIDA

FILE

MAR OT 2016 BRUCE

## **COVER LETTER**

| TO:    | Registration Section Division of Corporations  |               |   |                     |
|--------|--|---------------|---|---------------------|
| SUBJ   | Terra Privacy LLC  | a of Limito   | d Liability Company   |                     |
|        | Naii   | ie of Limite  | и глаонну Сопрану   |                     |
| Dear   | Sir or Madam:  |               |   |                     |
| The e  | nclosed Registered Agent/Registered Off  | ice Change    | and fee(s) are submitted for fi   | iling.              |
| Please | e return all correspondence concerning th  | is matter to  | the following:  |                     |
| Mich   | nael Wood  |               |   |                     |
|        | Name of Person   |               |   |                     |
| Terra  | a Privacy LLC  |               |   |                     |
|        | Firm/Company   |               | <del></del>   | 2016 MAR<br>SECRCIV |
| 110    | East Broward Blvd., Suite 1700   |               |   | MAR +               |
|        | Address  |               |   | m - r               |
| Fort   | Lauderdale, FL 33301   |               |   | OF STATE.           |
|        | City/State and Zip Code  | -             | <del></del>   | 16 34<br>16 34      |
| mw(    | @terraprivacy.com  |               |   |                     |
|        | E-mail address: (to be used for future and   | nual report r | otification)  |                     |
| For fu | urther information concerning this matter  | , please cail | :   |                     |
| Mich   | ael Wood   | 305           | 342-5326  |                     |
|        | Name of Person   |               | Area Code & Daytime   | Telephone Number    |
|        | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 |               | MAILING ADDRESS:<br>Registration Section<br>Division of Corporations<br>P.O. Box 6327<br>Tallahassee, Florida 32314 |                     |
|        | Enclosed is a check for the following  | g amount:     |   |                     |
|        | ■ \$25 Filing Fee  |               | \$55 Filing Fee & Certified   | Сору                |

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.

| ame of the limited liability company: 1erra Privacy   | LLC   |   |  |  |
|---|---|---|--|--|
| 110 East Broward Blvd.  | (b) 110 Ea  | (b) 110 East Broward Blvd.  |  |  |
| 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)  |  |  |
| Suite 1700  | Suite 1   | 1700  |  |  |
| Fort Lauderdale, FL 33301   | Fort La   | auderdale, FL 33301   |  |  |
| 01/06/2016  | L16000  | 004885  |  |  |
| Date of filing/registration in Florida  | 4.  | Document number   |  |  |
| Osvaldo Jerez   |   |   |  |  |
|   | the Florida Dept. of St   | nate:   |  |  |
| 9 NE 19th Ct.   |   |   |  |  |
| Registered Office Address (MUST BE FLORIDA STREET A   | ADDRESS)  | _   |  |  |
| Wilton Manors , FL  | 33305   | ZIIIS   |  |  |
|   |   | AR A  |  |  |
| Enter name of NEW Registered Agent and/or NEW Registered  | Office address:   | SSET - L  |  |  |
| Michael Wood  |   | 1-4 P 3: 34<br>ASSEE, FLORIDA   |  |  |
| NEW Registered Office Address:  |   | - REL   |  |  |
| 110 East Broward Blvd., Suite 1700  |   | <del></del>   |  |  |
| Fort Lauderdale , FL  | 33301   |   |  |  |
| ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member | the registered offi<br>ability company, it<br>of the limited liabil<br>limited liability co   | ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.  Printed or typed name of signce  Apacity. I further agree to comply with the   |  |  |
|   | 110 East Broward Blvd.  Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Suite 1700  Fort Lauderdale, FL 33301  01/06/2016  Date of filing/registration in Florida  Osvaldo Jerez  Registered Agent and Registered Office shown on the records of 9 NE 19th Ct.  Registered Office Address (MUST BE FLORIDA STREET A #C116  Wilton Manors , FL  Enter name of NEW Registered Agent and/or NEW Registered  Michael Wood  NEW Registered Office Address:  110 East Broward Blvd., Suite 1700  Fort Lauderdale , FL  imited liability company is not organized under the law ange or changes are made, the Florida street address of will be infertional. Or, in the case of a Florida limited liability an affirmative vote of the members of icles of organization or the operating agreement of the duture of a member of authorized representative of a member | 110 East Broward Blvd.  Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Suite 1700  Suite 7  Fort Lauderdale, FL 33301  Fort La  01/06/2016  Date of filing/registration in Florida  4.  Osvaldo Jerez  Registered Agent and Registered Office shown on the records of the Florida Dept. of St. 9 NE 19th Ct.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  #C116  Wilton Manors  FL 33305  Enter name of NEW Registered Agent and/or NEW Registered Office address:  Michael Wood  NEW Registered Office Address:  110 East Broward Blvd., Suite 1700  Fort Lauderdale  Fort Lauderdale  FL 33301  imited liability company is not organized under the laws of the State of lange or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company, i ere authorized by an affirmative vote of the members of the limited liability company is not organization or the operating agreement of the limited liability company is not organization or the operating agreement of the limited liability company. |  |  |