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SECRLIARY OF STATE

UN 20 2017 J. HARRIS

COVER LETTER

TO:

Registration Section

Divi	sion of Corporations					
SUBJECT:	TRADEMARK ADVANTAGE PROPERTIES, LLC					
SOBJECT.	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Off	ice Change	and fe	ee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to	the fo	llowing:		
MICHAEL	J. KIERZYNSKI					
	Name of Person			-		
KIERZYNS	SKI & ASSOCIATES, C.P.A.,	, P.A.				
	Firm/Company			-		
5143 COM	MERCIAL WAY					
	Address			5		
SPRING H	HILL, FL 34606					
	City/State and Zip Code			-		
MARYBET	TH@TAMPABAY.RR.COM					
E-mail	address: (to be used for future ann	ual report r	notifica	ation)		
For further in	nformation concerning this matter,	please call	:			
MICHAEL	J. KIERZYNSKI	352		5972800		
····-	Name of Person	_ " \		Area Code & Daytime Telephone Number		
Regi Divis Clift 2661	stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Encl	losed is a check for the following	amount:				
. 🛭 🗷 \$2	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. Na	ame of the limited liability company: TRADEMARK	(ADV	ANTAGE I	PROPERTIES, LLC	
2. (a)	6426 DRAKE COURT	a	(b) 6426 DRAKE COURT		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		•	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	NEW PORT RICHEY, FL 34652	_	NEW PO	ORT RICHEY, FL 34652	
	02/12/2016	_	L160000		
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CORPORATION SERVICE COMPANY			_	
	Registered Agent and Registered Office shown on the records of t 1201 HAYS STREET	he Florid	a Dept. of State	e:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			SECRITALLA	
	TALLAHASSEE , FL	32301		JUN 19 CHETARY LAHASSE	
(b)	MICHAEL J. KIERZYNSKI				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	9: 50 STATE LORIDA	
	5143 COMMERCIAL WAY			DA D	
	NEW Registered Office Address:			-	
	SPRING HILL , FL	34606		-	
the cha agent v was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi bility co f the lin limited	stered office ompany, it in ted liabilit liability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in npany.	
	Lilia Dollard	JU	LIE D. LO	Printed or typed name of signee	
I herei provisi the obl	y accept the appointment as registered agent and agroups of all statutes relative to the proper and complete ingular of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to ac perform I for in (iereby c	t in this cap ance of my Chapter 603 onfirm that	acity. I further garee to comply with the	
Signatu	re of Registered Agent				
	Division of Cornerations P.O. B	lox 632	7• Tallahas	ssee, FL 32314	

FILING FEE: \$25.00