214000042140

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(Cit	y/State/Zip/Phone	e #)				
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SECRETARY OF STALE. TALLAHASSEE. TLORIUM

S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2016

TIMOTHY E HARRIS TDH & FAMILY PROPERTIES LLC 1175 WENTWORTH CIRCLE ROCKLEDGE, FL 32955

SUBJECT: TDH & FAMILY PROPERTIES LLC

Ref. Number: L16000042160

We have received your document for TDH & FAMILY PROPERTIES 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):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with 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.

Shelia H Young Regulatory Specialist II

Letter Number: 716A00017414

LLC and not been se.

COVER LETTER

Division of Corporations					
SUBJECT: TDH & Family Properties LLC Name of Limited Liability Company	I -				
Name 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:					
Timothy Harris Name of Person	·				
TDH & Family Properties LLC Firm/Company	16 AUG				
1175 Wentworth Cir. Address					
Rockledge FL 32955 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Timothy Harris at (321) 307-23 Name of Person Area Code & Dayt	42 ime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 323	s				
Tallahassee, Florida 32301					
Enclosed is a check for the following amount:					
□ \$25 Filing Fee □ \$55 Filing Fee & Certif	fied Copy				
INHS18 (2/14) + 3le addendam					

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. Nam	ne of the limited liability company: TDH o Far	mily	Properties	i LC	
	778 Pinson BLUD	_ (b)			
.,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing ad	dress of limited li MAY BE POST (ability company: OFFICE BOX)
-	Rockledge FL 32955				
	2/29/14	_	L16000		o D
3.	Date of filing/registration in Florida	4.		ent number	
5. (a) _	Timothy E. Harris Registered Agent and Registered Office shown on the records of the	o Florida F	None of Ctata		
		e Florida L	dept. of State:		
	1175 Wentworth Cir : Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)			· a EES
	Rockledge FL 32955				25
	, FL				ਨ ਫ਼ਿੰਝੋਜ਼
-	, ^ 2				
(b) _					三 岩蓋
E	inter name of NEW Registered Agent and/or NEW Registered O	office addr	ess:		3 § m
	•				
1	NEW Registered Office Address:				
-				•	
_					
If the lim	nited liability company is not organized under the laws	of the S	tate of Florida it i	s hereby confi	rmed that after
the chang agent will was/were	ge or changes are made, the Florida street address of the liberal street address of the identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of es of organization or the operating agreement of the limited in the street and th	ne registo ility com the limite mited lia	ered office and the apany, it is hereby ad liability compandility company.	business offic confirmed tha ny or as otherw	te of the registered t the change(s) vise provided in
Siam-t-	of a mombar or authorized assessment of		Dawn M. Printed o	Harris	• •
_	re of a member or authorized representative of a member			••	
provisior the oblig to merely notified j	accept the appointment as registered agent and agree as of all statutes relative to the proper and complete partions of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to act therforman for in Ch creby con	n this capacity. 13 ice of mv duties, at apter 605, F.S. O. firm that the limite	urther agree to nd I am familio r, if this docun ed liability con	o comply with the ar with and accept nent is being filed inpany has been
	of Registered Agent				