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D. BRUCE FEB 14 2017

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: PAIS TREE LLC 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:		
MARTIN RUIZ Name of Person PAIS TREE LLC Firm/Company		
1800 SOUTH OCEAN DRIVE Ap. 3104	2017 TALL	
HALLANDALE BEACH, FL, 33009 City/State and Zip Code	2017 FEB 13	7
E-mail address: (to be used for future annual report notification)	3 P 4 07	
For further information concerning this matter, please call:	DF() 01	
MARTIN RUIZ at (305) 915 1634 Name of Person Area Code & Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	, a saada u	
Enclosed is a check for the following amount:		
№ \$25 Filing Fee		

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	ume of the limited liability company:	TKET	E LLC	<u> </u>		<u>.</u>
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		S OCE	of limited lis	bility com	
		HALLAN VALE BEACH, FL	HALLA	NDALE	BEA	CH, t	FL
		33009	3300	PC		· · · · · · · · · · · · · · · · · · ·	
3.		JUNE 7, 2016 Date of filing/registration in Florida 4.		1600		042	
5.	(a)	CORPORATE MAINTENANCE SERVI	CES, LI	LC			
٠.	(4)	Registered Agent and Registered Office shown on the records of the Florida I					
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1000 BRICKELL AVENUE, ST 400		JAL	2017 SLC		
		MIAM 1 , FL 331	131	 	CMC 1% BB1 III	771	
	(b)	MARTIN RVIZ		ASSEE	23 S		
		Enter name of NEW Registered Agent and/or NEW Registered Office addr	ress:	, , , , , , , , , , , , , , , , , , ,	T C	Ш	
		1800 S. OCEAN DRIVE # 3104		ORIE)	<u> </u>		
		NEW Registered Office Address:		>	07		
the ago wa the S	cha ent v s/we arti signat ovisi oblimere tified	imited liability company is not organized under the laws of the Singe or changes are made, the Florida street address of the registivil be identical. Or, in the case of a Florida limited liability concre authorized by an affirmative vote of the members of the limit cles of organization or the operating agreement of the limited liability concrete of a member of all statutes relative to the proper and complete performance of all statutes relative to the proper and complete performance of a member of all statutes relative to the proper and complete performance of the pr	State of Flo tered office mpany, it is ted liability ability com	and the bus hereby con company o pany. AARTIO Printed or typ	iness office firmed that r as otherway U Rula ed name of si	e of the retained the changing provided the changing provided the changing process of the complex complex to the complex to th	egistered age(s) ided in
	, 	Division of Cornerations P.O. Roy 6327s	. Tallahaa	El 222	1.4		

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

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