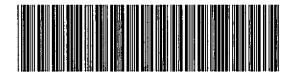
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Ci	.y/Ctate/2ip/Filone	" /		
PICK-UP	WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
<u> </u> 				

Office Use Only



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D. SCOTT JUL 7 2017

COVER LETTER

	Registration Section Division of Corporations			
SUBJECT: TYCH IMPORT & EXPORT, LLC. Name of Limited Liability Company				
Dear Sir	or Madam:			
The encl	osed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.		
Please re	turn all correspondence concerning this	matter to the following:		
	Jigna Shah Name of Person			
-	Firm/Company	·		
_24	S Jacaranda Drive Address	· 		
-PI	antation, FL 333 City/State and Zip Code	324		
E-n	tyca sales e gmail. connail address: (to be used for future annual	al report notification)	FILEU FILEU	
For furth	er information concerning this matter, p	lease call:	5 - F	
	igna Shah Name of Person	at (305) 316 - 9320 Area Code & Daytime Telephone N		
F C 2	Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Callahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	•	
	Enclosed is a check for the following a	mount:		
ŧ	\$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 a	ame of the limited liability company:	PORT & EXF	ORT, LLC
2. (a,	91.		
. (7)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	15036 sw 39th st.	1503	6 SW 39th st
	Davie, FL , 33331	DAYL	F, FL,33331
	Date of filing/registration in Florida	16	000 35387
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of t	he Florida Dept. of Stat	- e:
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	-
	15036 SW 39th St.		_
	Davie , FL	33331	-
(h)			
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	-
	NEW Registered Office Address:		- Pig a m
	245 Jacaranda DRIVE		
	29- Jacaramaa DRIVE		SSEC S
	Plantation ,FL	33324	LED WESTERIO
the cha agent v was/we	imited liability company is not organized under the law inge 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 cles of organization or the operating agreement of the	the registered office bility company, it i f the limited liabilit	orida, it is hereby confirmed that after e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	/figra hel		A Shah Printed or typed name of signee
•	ture of Amember or authorized representative of a member		•
provisi the obl to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	ee to act in this cap performance of my I for in Chapter 605 ereby confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been
Signatu	Jigna (W)		