## 116000142307

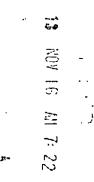
(Requestor's Name)						
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PICK-UF	P WAIT	MAIL				
	(Business Entity Nan	ne)				
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						





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## COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	TYLER STREET APTS LLC				
SOBII		of Limited Lia	ability Company		
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerning this	matter to the f	following:		
DANI	ELLE D. BEARMAN				
-	Name of Person		_		
TYLE	R STREET APTS LLC				
	Firm/Company		_		
1350	TYLER STREET, APT 1				
	Address		_		
HOLL	YWOOD, FL 33019				
	City/State and Zip Code	<del></del>			
ruthb	0825@gmail.com				
E	-mail address: (to be used for future annua	il report notific	cation)		
For fur	ther information concerning this matter, p	lease call:			
RUTH	BUTTENDORF	305 at (	439-9024		
	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	Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassec. Florida 32314		
	Enclosed is a check for the following amount:				
	<b>☑</b> \$25 Filing Fee	<b>□</b> \$5:	5 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	lame of the limited liability company: TYLER STR	REET APT	SLLC	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Λ	lailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	777 S FEDERAL HIGHWAY			THURE WATER TONE OF FICE BOX
	FORT LAUDERDALE, FL 33316			
	7/29/16	L	.1600014	2307
3.	Date of filing/registration in Florida	4.		Document number
5. (a	RUTH BUTTENDORF			
<i>J.</i> ("	Registered Agent and Registered Office shown on the records o	f the Florida I	Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	777 S FEDERAL HIGHWAY			<i>ā</i>
	FORT LAUDERDALE	L 33316		6
	DANIELLE E REARMAN		<del></del>	16
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addr	·····	
			<del></del> -	<del>1</del>
	TYLER STREET APTS LLC			22
	NEW Registered Office Address:			
	1350 TYLER STREET, APT. 1			
	HOLLYWOOD . FI	L_33019		
the ch agent was/w the ar	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited larger authorized by an affirmative vote of the members licles of organization or the operating agreement of the larger of a member or authorized representative of a member or authorized representative of a member or authorized representative of a member of the appointment as registered agent and agent agent and agent	nws of the S of the registe iability con of the limit e limited lia	ered office apany, it is ed liability completed.  IELLE D.	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  BEARMAN  Printed or typed name of signee  city. I further garge to comply with the
provis the ob to me	of accept the appointment as registered agent and aginous of all statutes relative to the proper and completely ligations of my position as registered agent as provided by reflect a change in the registered office address, leadin writing of this change.	e performan ed for in Cl hereby con	ice of my diapter 605, girm that t	the second of the land acceptained in the land acceptaines, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Signat	ure of Registered Agent			