Divisor of Constraint Sting, Sever Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

(...)

Email Address:____

LLC REGISTERED AGENT CHANGE TLE AT OLDSMAR, LLC

2820 OCT 23 AM II: 50

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15129570210

CÔVER LETTER

Division of Corporations	
SUBJECT: TLE at Oldsmar,	LLC
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Mary Castillo	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
1701 Directors Blvd, Suite 300	
Address	
Austin, TX 78744	
City/State and Zip Code	
E-mail address: (to be used for future and	nual report notification)
For further information concerning this matter	, please cail:
Mary Castillo	888 705-7274
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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	g amount:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

15129570210

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

Flo	orida. TIE s+ Old	lemar II	_	
1.	Name of the limited liability company: TLE at Old	ismar, LL	.L	
2.	(a) 210 HILLSBORO TECHNOLOGY DRIVE	E (b) 21() HILLSBORO	TECHNOLOGY DRIVE
	Principal office address of limited liability company:	<u> </u>	•	s of limited liability company:
	(Note: MUST BE STREET ADDRESS)	חב		<u>'BE POST OFFICE BOX</u>) □ Λ ∩ □ □ □ □ □ □ Λ Λ 1
	DEERFIELD BEACH, FL 33441		EKFIELD B	EACH, FL 33441
	3/17/2017	- — L17	000062194	
3.	Date of filing/registration in Florida	4.	Document r	
۶.	CORPORATION SERVICE COM		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
5.	(a)		of States	
	Registered Agent and Registered Office shown on the records of t	пе гютиа Бері.	or state:	
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		
	TALLAHASSEE, FL	32301		•
	(b) Registered Agent Solutions, Inc.			() ()3
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		
	155 Office Plaza Dr.			
	NEW Registered Office Address:			<u> </u>
	Suite A			
	Jake A			
	Tallahassee, _{FL}	32301		
the ago wa	the limited liability company is not organized under the law e change or changes are made, the Florida street address of ent will be identical. Or, in the case of a Florida limited lia s/were authorized by an affirmative vote of the members of e articles of organization or the operating agreement of the	the registered ability compar of the limited I	office and the bu ly, it is hereby cor lability company o	siness office of the registered afirmed that the change(s)
/s/	Richard Weissman	Richard	Weissman	Manager
- 5	Signature of a member or authorized representative of a member		• •	ped name of signee
	the state of the second and the second area and asset as a second asset as a second asset as a second asset as	and to seed in the	ie ganacity. I fort	har agree to comply with the

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent