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Division of Corporations

15129570210

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 TBC 936 5TH AVENUE, LLC

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**COVER LETTER** 

TO:

Registration Section Division of Corporations

SUBJECT: TBC 936 5th Avenue, LLC

15129570210

Name of Limited Liability Company

Dear Sir or Madam:

INHS 18 (2/14)

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this 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 annu	al report notification)			
For further information concerning this matter, p				
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 amount:				
□ \$25 Filing Fec	□ \$55 Filing Fee & Certified Copy			

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.

I. Na	ame of the limited liability company: TBC	936 5th A	venue, LLC	
2. (a)	13920 58TH STREET N., SUITE	E 1014 (b) 1	3920 58TH STREET N., SU	ITE 1014
2. (u)	Principal office address of limited liability compa		Mailing address of limited liability	
	(Note: MUST BE STREET ADDRESS)	200 (	( <u>Note: MAY BE POST OFFICE</u> NEAD\NATED EI	
	CLEARWATER, FL 337	60 (	CLEARWATER, FL	33700
	6/19/2017	L	17000133427	
3.	Date of filing/registration in Florida	4.	Document number	
5 (0)	YEOMANS, WILLIAM B	, JR.		
5. (a)	Registered Agent and Registered Office shown on the re	<del></del>	pt. of State:	
	13920 58TH STREET N	<b>1</b> .,		
	Registered Office Address (MUST BE FLORIDA S	TREET ADDRESS)		
	SUITE 1014			
	CLEARWATER	<sub>. FL</sub> 33760	)	Ë
(b)	Registered Agent Solution	ons, Inc.		
	Enter name of NEW Registered Agent and/or NEW Re	egistered Office addre	<b>5.5</b> :	. •
	155 Office Plaza Dr.			0.5
	NEW Registered Office Address:			
	Suite A		<del></del>	
	Tallahassee	, FL 3230		
If the	limited liability company is not organized unde	er the laws of the St	ate of Florida, it is hereby confirmed	that after

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ William B. Yeomans, Jr.

William B. Yeomans, Jr. Manager

Signature of a member or authorized representative of a member

Printed or typed name of signee

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

Mackenzie Hart, Asst. Secretary