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Division of Corporations Electronic Filing Cover Sheet

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To:		1/2
	Division of Corporations	5
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From:	Account Name : C T CORPORATION SYSTEM	တ္
	Account Number : FCA000000023	رن
	Phone : (514)280-3338	
	Fax Number : (954)208-0845	.*
	the email address for this business entity to be used fo nual report mailings. Enter only one email address please	

## LLC REGISTERED AGENT CHANGE T.A. EMERALD PROPERTIES, LLC

Certificate of Status	0
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## To.

## 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.

	Principal office address of limited liability company:  (b)  Malling address of limited liability company:								
	Principal office address of limited flability company: (Note: MUST BE STREET ADDRESS)		Malling address of limited liability company: (Nate: MAY BE POST OFFICE BOX)						
	1044 HIGHWAY 98, UNIT 1501		107 TA	LL OAKS DRIVE	نْدَ	. 4			
	DESTIN, FL 32541		SENATOBIA, MS 38668		Ö	, 44			
	11/20/2017		L170002	238618	2	• •			
	Date of filing/registration in Florida	4.		Document number	ابي				
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	Registered Agent and Registered Office shown on the records SHAFFER, LISA	s of the Florid	la Dept. of S	bute:					
	Registered Office Address <u>CMUST BE FLORIDA STRE</u> 10952 E. COUNTY HWY 30A SUITE B	ET ADDRES.	S)	<del></del>					
	INLET BEACH	FL_32461		<del></del>					
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) .	Filter name of NEW Raphtherad Agant und/or NEW Regions	ent Office of	drase:	· • • • · · · · · · · · · · · · · · · ·					
	Enter name of NEW Registered Agent unclor NEW Registered NRAI Services, Inc.	red Office ad	idress:	· · · · · · · · · · · · · · · · · · ·					
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	NRAI Services, Inc.	red Office ad	idress:						
	NRAI Services, Inc.  NEW Registered Office Address: 1200 South Pine Island Road	FL 33324	idress:						
fir an web	NRAI Services, Inc.  NEW Registered Office Address: 1200 South Pine Island Road	FL 33324 laws of the of the reging liability expenses to accomplete to a	State of I stered off ompany, in the liability of the lia	ice and the business office to shereby confirmed that lity company or as otherwompany.  Printed or typed name of sampacity: I further average to	e of the regist the change(vise provided)	stered (s) d in			