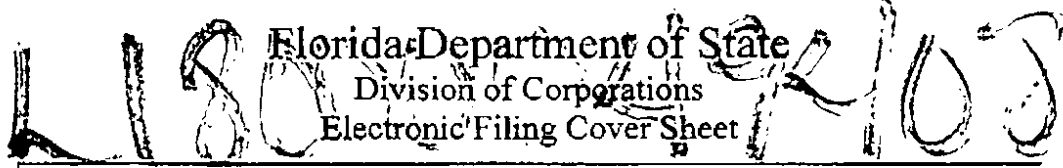


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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000137670 3)))



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LLC REGISTERED AGENT CHANGE
TM4 LIMITED LLC

Certificate of Status	0
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APR 29 2019



April 26, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TM4 LIMITED LLC
11381 STANFORD AVE
SPRING HILL, FL 34609US

SUBJECT: TM4 LIMITED LLC
REF: L18000049408

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

YOU ARE AN LLC BUT YOU USE THE CORPORATION COVER SHEET AND FEES

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

FAX Aud. #: H19000135269
Letter Number: 119A00008381

2019 APR 26 AM 10:06

APPROVED
AND
FILED

(((H19000137670 3)))

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. Name of the limited liability company: TM4 LIMITED LLC

2. (a) 11381 STANFORD AVE
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SPRING HILL, FL 34609

(b) _____
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. _____ Date of filing/registration in Florida

4. L18000049408 Document number

5. (a) LEGALINC CORPORATE SERVICES INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5237 SUMMERLIN COMMONS BLVD STE 400

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

FORT MYERS, FL 33907

(b) ROCKET LAWYER CORPORATE SERVICES LLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

155 OFFICE PLAZA DRIVE, 1ST FLOOR

NEW Registered Office Address:

TALLAHASSEE, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change of 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.

Signature of a member or authorized representative of a member

Timothy Moyer

Printed or typed name of signer

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.

Leticia Hemery, Asst Secretary
Signature of Registered Agent

Division of Corporations P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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