L19000 179 123

Office Use Only



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SECKETARY OF STATE TALL AHASSEE, FL

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TTCS Real Est	ate Holdings bility Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and for	ee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
Michael Poch Name of Person TTCS Real Estate Holding Firm/Company	- &
15 Ladosa AJe Address	_
Tunga FL 33606 City/State and Zip Code	_
E-mail address: (to be used for future annual report notific	eation)
For further information concerning this matter, please call:	
Leah Perlman at (401 Name of Person	Nea Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
\$25 Filing Fee \$55	5 Filing Fee & Certified Copy

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.

Name of the limited liability company:	Real Estate Holdings
2: (a): 15 Ladoga Ade	(b) 15 Ladora AJC To
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Tamper FL 33606	Tampa, FL 33606
- Marpa, 10 3200	
	
4/17/21	L19000 179123
3. Date of filing/registration in Florida	4. Document number
5. (a) Corporation Sendic Compe Registered Agent and Registered Office shown on the records of	mh
	the Floresta Dept. of State:
1201 Hays Street Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)
<u></u>	ACCEPTION OF THE PROPERTY OF T
Tallahasec FI	32301-2525 AND TO THE STATE OF
DATE TRANSPORT	SSS TO
(b) Leah Berlman	
Enter name of NEW Registered Agent and/or NEW Registered	Office address:
15 Ladoca Ave	
NEW Registered Office Address:	
,	$\sim 10^{\circ}$
Jampa. FL	33606
If the limited liability company is not organized under the law change or changes are made, the Florida street address of the	
agent will be identical. Or, in the case of a Florida limited lia	ability company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the	
In 11	Michael Yoch
Signature of a number of authorized representative of a member I hereby accept the appointment as registered agent and agr	Printed or typed name of signee
provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provide to merely reflect a change in the registered office address, I	performance of my duties, and I am familiar with and accept d for in Chapter 605. F.S. Or, if this document is being filed
to merely reflect a change in the registered office address, I inotified in writing of this change.	hereby confirm that the limited liability company has been