Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

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.

	B 4 4			
-mail	Address:			

LLC REGISTERED AGENT CHANGE TAG 331 MEMBER, LLC

Certificate of Status	0
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COVER LETTER

	gistration Section vision of Corporations						
SUBJECT	TAG 331 Member, LLC						
		Name of Limited	Liability Company				
Dear Sir or	Madam:						
The enclos	ed Registered Agent/Registered	Office Change an	d fee(s) are submitted for filing.				
Please retu	rn all correspondence concerning	g this matter to th	e following:				
Vanessa Ca	stillo						
	Name of Person						
Registered.	Agent Solutions, Inc.						
•	Firm/Company						
Corporate (Center One, 5301 Southwest Pkwy. S	Ste 400					
	Address						
Austin, TX	78735						
	City/State and Zip Cod	le					
E-ma	il address: (to be used for future	annual report not	ification)				
For further	information concerning this mat	ter, please call:					
Vanessa Ca	stillo	888 at (705-7274				
	Name of Person		Area Code & Daytime Telephone Number				
Re Di P.0	egistration Section vision of Corporations O. Box 6327 Ilahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
En	closed is a check for the follow	ing amount:					
0	\$25 Filing Fee	a	\$55 Filing Fee & Certified Copy				
INHS18 (2/	14)						

1. Name of the limited liability company: TAG 331 Member, LLC

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

→ 18506176383

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.

2. (a)	975 6TH AVE SOUTH	(b	P.O. BOX 250			
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		ì	Mailing address of him (Note: MAY BE PO	OST OFFICE	
	SUITE 200		PINELLAS	S PARK, FL 33781		
	NAPLES, FL 34102					
	5/11/2022		1.220001933	137		
3.	Date of filing/registration in Florida	4,		Document numbe	<u></u>	
5. (a)	WILLIAM B. YEOMANS, JR.					
J. (a,	Registered Agent and Registered Office shown on the records of 975 6TH AVE SOUTH	of the Florida	Dept. of State	- :: -		
	Registered Office Address (MUST BE FLORIDA STREE SUITE 200	. U				
	NAPLES FL 34102				2023 H 10	
(b)	Registered Agent Solutions Inc					
	Enter name of NEW Registered Agent and/or NEW Register	,	<u>.</u>			
	155 Office Plaza Dr.				PH 12:	C
	NEW Registered Office Address:		- 2			
	Suite A			-		
	Tallahassee, I	L_32301				
change agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	ne registere liability co of the lim	ed office and mpany, it is ited liability	I the business office thereby confirmed to company or as o	ice of the reg d that the ch	gistered ange(s)
/s/	Nicole Smigliani	Nice	ole Smigliani	Men	nber	
Signa	ature of a member or authorized representative of a member			Printed or typed nam	ne of signee	
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid rely reflect a change in the registered office address, a d in writing of this change.	gree to act e performa led for in C I hereby co	in this capa ince of my a Chapter 605, onfirm that t	icity. I further agi luties, and I am fa , F.S. Or, if this d he limited liability	ree to complimiliar with locument is leading to the company his co	ly with the and accept being filed as been
	Mackenzie Hibler, Asst. Sec	retary				
Signati	ure of Registered Agent					