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COVER LETTER

10.	Division of Corporations					
SUBJ	TRG LANIERS ASM LLC					
	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The ci	nclosed Registered Agent/Reg	istered Offic	cc Chan	gc and f	cc(s) are submitted for filing.	
Płcaso	return all correspondence cor	ccrning this	matter	to the fo	ollowing:	
	Dylan Ma	rma				
	Name of Pe	rson				
	TRG LANIERS	ASM LLC	;			
	Firm/Comp	any	<u>-</u>	 -	_	
	7521 Paula Driv	e #2600	85			
•	Address		_		_	
	Tampa, FL 33	3685				
	City/State and 2	Zip Codc	_		_	
	dylan@therequ		•		_	
	E-mail address: (to be used for	future annu	al repor	t notific	ation)	
For fu	rther information concerning t	his matter, p	please e	all:		
	Dylan Marma		at (+1	619.535.1000	
	Name of Person		_		Arca 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					
	≥ \$25 Filing Fcc			□ \$5	5 Filing Fcc & Certified Copy	
INHSI	8 (2/14)					

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.

l. Na	ame of the limited liability company:TRG	LANIERS A	ASM LLC			
2. (a)	7521 Paula Drive #260085 Tampa, FL 33685	(h) 752	(b) 7521 PAULA DRIVE #260085 TAMPA, FL 33685			
- (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
3. 5. (a)	Date of filing/registration in Florida Dylan Marma	4.	Document number			
	Registered Agent and Registered Office shown on the records of t	he Florida Dept.	of State:			
	Registered Office Address (MUST BE FLORIDA STREET A	2024 OCT				
	Tampa .FL	33685	N .			
(b)	Virtual Post Solutions, Inc. Enter name of NEW Registered Agent and/or NEW Registered	PN 3: 50				
	1032 E Brandon Blvd		·			
	NEW Registered Office Address:					
	Brandon FL_	33511				
change igent w was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable.	registered offic bility company f the limited li	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.			
Signat	ure of a member or authorized representative of a member		Dylan Marma Printed or typed name of signee			
provision he obli o mere notified	ov accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have been also address, I have been address of this change.	ee to act in this performance of for in Chapte ereby confirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been			