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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: (Note: MUST RESTREET ADDRESS) 3310 Mary Street Suite 302 Coconut Grove, FL 33133 Coconut Grove, FL 33133 Coconut Grove, FL 33133 Date of filling/registration in Florida 3. Date of filling/registration in Florida Registered Agent and Registered Office shown on the records of the Florida Dept. of State: NRAI SERVICES. INC. Registered Address 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 1201 Hays Street Tellahassee 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 or changes are made, the Florida street address of the registered office and the business office of the registered office and the distinct of the change or changes are made, the Florida street address of the resistered office and the business office of the registered office was force of the registered office and the business office of the registery 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 or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the obligations of all statutes relative to the proper and complete performance of my duties, and I am plantiar with indicated in member of agent with the infinite of liability company in a screen. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am plantiar with and accept the appointment are registered agent and complete performance of my duties, and I am plantiar with and accept the obligations of all statutes relative to the proper and complete performance of my duties, and I am plantiar with and accept the obligations of an ember of sup	1. N	ame of the limited liability company:TAF SDGC, Li	LC		
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2. Date of filing/registration in Florida 2. Document number 3. Date of filing/registration in Florida 3. Document number 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: NRAI SERVICES, INC. Registered Office Address MUST RE FLORIDA STREET ADDRESS) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company NEW Registered Office Address: 1201 Hays Streat 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 or 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 direction or administration of a member 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 thities, and I am Januliar with and accept the appointment of the proper and complete performance of my thities, and I am Januliar with and accept the appointment of the proper and complete performance of my thities, and I am Januliar with and accept the appointment of the proper and complete performance of my thities, and I am Januliar with and accept the appointment of the schange in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.		3310 Mary Street Suite 302		3109 G	RAND AVENUE #349
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	Signatur		GRACE	E. KIRBY	, ASST. VICE PRESIDENT