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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Smetana

Date: August 16, 2013

Order#: 764138/022

Re: TAMPA BAY 1, L.L.C.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Alex Smetana

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA



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

Pursuant to the provisions of sections 608.416 or 608.508. 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. Na	me of the limited liability company: TAMPA BAY 1, I	L.C.	
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 3616 Nassau Street Tampa, FL 33606	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P O Box 3277 Tampa, FL 33601-3277	THE
	07/13/1999	L99000004229	THE P
	2 3	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of S	Haie:
	Registered Agent:	Brian E. Langford	
	Registered Office Address:	1715 West Cleveland Street Tampa, FL 33606	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address: Corporation Service Company	
	NEW Registered Agent: NEW Registered Office Address:	1201 Hays Street	
	(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL	32301
confir and the liabilithe me the op	limited liability company is not organized under the lamed that after the change or changes are made, the Flate business office of the registered agent will be identity company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwiperating agreement of the limited liability company.	orida street address of the registere ical. Or, in the case of a Florida lin was/were authorized by an affirma	d office nited tive vote of
	Priebe Authorized Person or typed name of signee	-	
I here compo and I Chap addre	eby accept the appointment as registered agent and a ly with the provisions of all statules relative to the pro am familiar with and accept the obligations of my po ter 608, F.S. Or, if this document is being filed to me ass, I hereby confirm that the limited liability company	gree to act in this capacity. I furth oper and complete performance of s sition as registered agent as provia rely reflect a change in the register s has been notified in writing of this	er agree to my duties, led for in ed office s change.
By:	ure of Regional Corporation Service Company	Sylvia Queppet, Asst VP	

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

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