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To:

Division of Corporations

Fax Number

: (850) 617-6380

From:

: CHARLES BACLET AND ASSOCIATES INC Account Name

Account Number : I20080000054 Phone ; (949)955-9585

Fax Number : (800)562-6504

REGISTERED AGENT CHANGE

TIC VILLAGE SQUARE 3, LLC

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M. THOMAS

MAR - 6 2009

EXAMINER

MAR, 5-2009 08:01 FROM:

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. N	ame of the limited liability company: TIC VILLAG	E SQUARE 3, LLC	
2. (a	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	: 2 North Tamiami Trail Suite 308 Sarasota FL 34236	
(b	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Galastia. FL 34236	
2/6/20		M06000000661	
3. Da	ate of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
	Registered Agent:	National Corporate Research, Ltd., inc.	
	Registered Office Address:	515 East Park Avenue	
		Tallahassee FL 32301	
(b	Enter name of NEW Registered Agent and/or NEV	V Registered Office address:	
	NEW Registered Agent;	NRAl Services, Inc.	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2731 Executive Park Drive Suite 4	
		<u>Weston</u> .FL 33331	
that a office hereb liabili limite	limited liability company is not organized under the laster the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cay confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of d liability company.	address of the registered office and the bytenessons of a Florida limited liability company. To	
Nick (Printe	Rhodes, Authorized Person d or typed name of signee)	ARIDA 1: 26	
	eby accept the appointment as registered agent and at ly with the provisions of all statutes relative to the pro- miliar with and accept the obligations of my position of Or, if this document is being filed to merely reflect a c m that the limited liability company has been notified Jose Castellanos,	gree to act in this capacity. I further agree to per and complete performance of my duties, and I us registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in Writing of this change. Asst. Secretary	
(Signal	ure of Registers (Agent)		
	Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314	

INHS18 (05/08)

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