M17000004379

(Re	questor's Name)	
,	,	
(Ad	dress)	
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	10	(A
(Cit	y/State/Zip/Phone	9 #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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8 OCT -9 PM 12: 4.9

SECRETARY OF STATE

D. BRUCE

OCT 1 0 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: TIH CGC, LLC (Name of Lin	nited Liability Company)			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing	3 .		
Please return all correspondence concerning this n	natter to the following:			
MARYKE GUILD (Name of Person)				
PRUDENTIAL CRES COMMERCIAL REAL ESTATE - (Firm/Company)		SECRE TALLA	08 0	
120 S. PALMETTO AVENUE		HAS:	CT -	FILED
(Address)	·	SEC.	9	m
DAYTONA BEACH, FL 32114 (City/State and Zip Code)		RETARY OF STATE LAHASSEE, FLORIDA	OCT -9 PH 12: 49	0
For further information concerning this matter, ple	ease call:			
MARYKE GUILD at (386) 253 8565			
(Name of Person)	(Area Code & Daytime Telephone Numl	ber)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following am	ount:			
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

INHS18 (5/08)

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. Name of the limited liability company: TIH CGC	C, LLC
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany: 2801 TENAYA WAY, SUITE C LAS VEGAS, NV 89128
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME
4/28/08 3. Date of filing/registration in Florida	M07000004379 4. Document number
5. (a) Registered Agent and Registered Office shown Registered Agent: Registered Office Address:	PARACORP INCORPORATED 236 EAST 6TH AVENUE TALLAHASSEE, FL 32303 TO THE PROOF TO T
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	FLSI = 0
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	PRUDENTIAL CRES COMMERCIAL REAL ESTATE 120 S. PALMETTO AVENUE DAYTONA BEACH, FL 32114
that after the change or changes are made, the Florida office of the registered agent will be identical. Or, in t	the case of a Florida limited liability company, it is zed by an affirmative vote of the members of the limited
DAVID STUBBS (Printed or typed name of signee) I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my poss F.S. Or, if this document is being filed to merely reflect confirm that the limited littliff company has been not (Signature of Registered Agent)	and agree to act in this capacity. I further agree to be proper and complete performance of my duties, and I wition as registered agent as provided for in Chapter 608, ct a change in the registered office address, I hereby tified in writing of this change.

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