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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer;	
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Office Use Only



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J. Shivers JAN 15 2000



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby gkirby3@cscinfo.com

Date: January 9, 2014

Order#: 907590-057

Re: TARPON TOWERS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby

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

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

QUCA.XCOA

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

Pursuant to the provisions of sections 605.0114, 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: TARPON TOWER	RS, LLC	
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Suite 420 Bradenton, FL 34205	<u> </u>
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1001 3rd Avenue West Suite 420 Bradenton, FL 34205	<u> </u>
09/30/2009	M09000003876	
3. Date of filing/registration in Florida 4	4. Document number	_
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:	
Registered Agent:	Brett Buggeln	
Registered Office Address:	1001 3rd Avenue West Suite 420 Bradenton, FL 34205	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>		
<u>NEW</u> Registered Agent:	Corporation Service Company	
NEW Registered Office Address:	1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited	e of r
Dona Priebe, Authorized Representative		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 605, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree per and complete performance of my dutie ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change	to s, 1
By: Drace & Kirby		
Signature of Registered Agent Corporation Service Company	Grace E. Kirby, Asst. VP	

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