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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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SEPTIONED AND FILED



COVER LETTER

TO:	Registration Section Division of Corporations								
SUBJ	NORTH RIVER VILLAGE GEC, LL	NORTH RIVER VILLAGE GEC, LLC							
	Name of Limited Liability Company								
Dear S	Sir or Madam:								
The e	nclosed Registered Agent/Registered Offic	ce Change a	nd fee(s) are submitted for filing.						
Please	e return all correspondence concerning this	s matter to t	he following:						
JILL:	PROBST								
	Name of Person								
NATI	ONAL SERVICE INFORMATION, INC								
	Firm/Company								
145 B	BAKER ST		·						
	Address								
MAR	JON, OHIO 43302								
	City/State and Zip Code								
JILL(@NSII.NET								
	E-mail address: (to be used for future ann	ual report no	otification)						
For f	urther information concerning this matter,	please call:							
ЛLL	PROBST	740 at (387-6806						
	Name of Person		Area Code & Daytime Telephone Number						
	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	nclosed is a check for the following amount:							
	□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy						
INHS	S18 (2/14)								

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.

1.	Na	me of the limited liability company:	TLLAC	GE GI	EC, LLC		
2. (a	a)	250 CIVIC CENTER DRIVE SUITE 500	((b)			
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		COLUMBUS, OHIO 43215	_				
		10/05/2012		M1	2000005	597	
3.		Date of filing/registration in Florida	4.			Document number	
5. ((a)	GREENE, ROBERT FESQ					
. (4)	(-)	Registered Agent and Registered Office shown on the records of the 601 12TH STREET WEST Registered Office Address	- e: -				
						=	
		BRADENTON , FL	34205			SECRETALLAH	
(b)	b)	NRAI Services, Inc.	FEB -5 I				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	∵ <u> </u>					
						F STATE FLORIDA	
		NEW Registered Office Address:	IDA 12				
		1200 South Pine Island Road	-				
		Plantation , FL	33324				
the ager	cha nt v /w/ art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the	vs of the regulation the regular the limited the limit	ne Sta gister comp mite d liab	ed offic cany, it in d liability ility con	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.	
I he protect the notion NR. By:	ere visi obi ifie AI	ture of a member of authorized representative of a member by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I h d in writing of this change. Services, Inc. ASSI	perfor d for ir iereby	mano cha conf	e of my opter 60. irm that	duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	

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