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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)					
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•CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

			ACCOUNT	NO. :	1200000001	95
			REFERE	ENCE :	635577	7358264
			AUTHORIZAT	FION :	Louis &	man
			COST LI	EMIT :	\$ 25.00	- Mart
ORDER	DATE	:	April 22, 20)22		
ORDER	TIME	:	2:0 PM			
ORDER	NO.	:	635577-001			

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CHANGE OF AGENT

NAME: TGN COMMUNITY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CUSTOMER NO: 7358264

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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.

I. Na	me of the limited liability company:	ITY, LL	.C					
2. (a)			(b)					
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		X - y	М	ailing address (<u>Note: MA</u>)	of limited li	ability co	ompany:
	433 PLAZA REAL SUITE 275			433 PLAZA	A REAL SUI	ITE 275		
	BOCA RATON, FL 33432		-	BOCA RAI	ON, FL 33	432		
	06/16/2017		M	117000005	127			
3.	Date of filing/registration in Florida	4.		Ľ	Document n	umber		
5. (a)								
,. (u)	Registered Agent and Registered Office shown on the records of Registered Agent Solutions, Inc.	the Flori	da L	ept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRES	<u>SS)</u>					
	155 Office Plaza Dr. Suite A					сл.	~ ~2	
	TALLAHASSEE	32301					2022 APR 27	
						- Halvissee	2 2 2	ថ្មី រ
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>					31. (51) (54)		*
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	<u>addr</u>	<u>'ess</u> :		μ. Γιο	Aм	
	Corporation Service Company					, FL	8: 22	0
	NEW Registered Office Address:					111	\sim	
	1201 Hays Street							
	Tallahassee	32301						
change igent w vas/we	mited liability company is not organized under the lay or changes are made, the Florida street address of the zill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability c of the lin	red com mite	office and pany, it is l ed liability	the busines hereby conf company of	s office of irmed that	the reg the cha	istered ange(s)
	Jie E. almie	JIL						
	ure of a member or authorized representative of a member				Printed or type		-	
provisio he obli o mere	ny accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. If (in writing of this change.	ee to ac perform l for in tereby c	ct ir nan Ch con	this capac ce of my du apter 605, 1 firm that th	ity. 1 furthe uies, and 1 a F.S. Or, if i e limited lic	er agree to am familia this docum ability com	compl r with a ent is l pany h	y with the and accept being filed as been
	Inare C. Kuble	GRAC	ΕE	. KIRBY, J	ASST. VIC	E PRESID	ENT	
Signatur	e of Registered Agent							

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

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