I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TRACEY K. SHRINE

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent: SHRINE, DANIEL

3445 GARBER DRIVE TALLAHASSEE, FL 32303 US

FEI Number: 46-4613132

Current Mailing Address: 3445 GARBER DRIVE

TALLAHASSEE. FL 32303 US

DOCUMENT# L13000175681

3445 GARBER DRIVE TALLAHASSEE, FL 32303

Entity Name: 3445 GARBER DRIVE, LLC

Current Principal Place of Business:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	SHRINE, DANIEL N	Name	SHRINE, TRACEY K
Address	3445 GARBER DRIVE	Address	3445 GARBER DRIVE
City-State-Zip:	TALLAHASSEE FL 32303	City-State-Zip:	TALLAHASSEE FL 32303

MANAGER

Certificate of Status Desired: No

Date

01/10/2017 Date