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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN D. GOULETTE

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P07000132103

Entity Name: THE TROLLINATOR CORPORATION

Current Principal Place of Business:

6000 PHILLIPS HIGHWAY 7 JACKSONVILLE, FL 32216

Current Mailing Address:

6000 PHILLIPS HIGHWAY 7 JACKSONVILLE, FL 32216 US

FEI Number: 26-1613973

Name and Address of Current Registered Agent:

GOULETTE, STEPHEN D 505 SAINT CLAUDE PLACE ST. JOHNS, FL 32259 US

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

Officer/Director Detail :

Title	PRES	Title	DIRECTOR
Name	GOULETTE, STEPHEN D	Name	GOULETTE, KATHLEEN MARY
Address	505 SAINT CLAUDE PLACE	Address	505 ST. CLAUDE PLACE
City-State-Zip:	ST. JOHNS FL 32259	City-State-Zip:	SAINT JOHNS FL 32259

PRESIDENT

01/15/2016

FILED Jan 15, 2016 Secretary of State CC9600882113

Certificate of Status Desired: No

Date

Date