2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2014
Secretary of State
CC5208039448

DOCUMENT# L10000066271

Entity Name: TALLAHASSEE TRIAD, LLC

Current Principal Place of Business:

459 W. COLLEGE AVE.
TALLAHASSEE, FL 32301

Current Mailing Address:

459 W. COLLEGE AVE.
TALLAHASSEE, FL 32301

FEI Number: 27-2959452

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GILBERTSON, DANIEL W
459 W. COLLEGE AVE.
TALLAHASSEE, FL 32301 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 — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	GILBERTSON, DANIEL W	Name	KENT, NICHOLAS
Address	459 W. COLLEGE AVE.	Address	459 W. COLLEGE AVE.
City-State-Zip:	TALLAHASSEE FL 32301	City-State-Zip:	TALLAHASSEE FL 32301

Title	MGRM
Name	COREY, ADAM
Address	459 W. COLLEGE AVE.
City-State-Zip:	TALLAHASSEE FL 32301

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: DANIEL GILBERTSON MGRM 02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date