

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000010534

Entity Name: CHAT-TN, LLC

Current Principal Place of Business:

700 E. WALNUT ST.
LAKELAND, FL 33801

Current Mailing Address:

700 E. WALNUT ST.
LAKELAND, FL 33801 US

FEI Number: 27-4674204

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCFARLANE, PETER A
500 S FLORIDA AVE
STE 715
LAKELAND, FL 33801 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 |
| Name | MCFARLANE, PETER A |
| Address | 700 E WALNUT ST |
| City-State-Zip: | LAKELAND FL 33801 |
| Title | MGRM |
| Name | MCFARLANE, JEFF |
| Address | 2000 E 23RD ST |
| City-State-Zip: | CHATTANOOGA TN 37404 |

| | |
|-----------------|----------------------|
| Title | MGRM |
| Name | MCFARLANE, NANCY |
| Address | 700 E WALNUT ST |
| City-State-Zip: | LAKELAND FL 33801 |
| Title | MGRM |
| Name | MCFARLANE, MATTHEW |
| Address | 2000 E 23RD ST |
| City-State-Zip: | CHATTANOOGA TN 37404 |

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: PETERMCFARLANE

04/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date