

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000214190

Entity Name: TCCO LLC**Current Principal Place of Business:**2291 DUNLOP ST
APT 58
SAN DIEGO, CA 92111**Current Mailing Address:**3901 NW 79TH AVE SUITE 245 #743
MIAMI, FL 33166 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEGALINC CORPORATE SERVICES INC.
5237 SUMMERLIN COMMONS
SUITE 400
FORT MYERS, FL 33907 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 | AMBR |
| Name | CASSIS, ROCIO |
| Address | 1510 ORANGE AVE APT 403 |
| City-State-Zip: | REDLANDS CA 92373 |

| | |
|-----------------|--------------------------|
| Title | AMBR |
| Name | BRICENO, MARIA DE LA LUZ |
| Address | 2291 DUNLOP ST APT 58 |
| City-State-Zip: | SAN DIEGO CA 92111 |

| | |
|-----------------|--------------------------|
| Title | AMBR |
| Name | SILVA, MARIA SOLEDAD |
| Address | 2291 DUNLOP ST APT 58 |
| City-State-Zip: | SAN DIEGO CA 92111 |

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: ROCIO CASSIS**MEMBER****04/15/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date