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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: TDC ASSET MANAGEMENT LIMITED PARTNERSHIP

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A06000001125

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Marc Hagle

(Contact Person)

Tricor International Corporation

(Firm/Company)

100 East Sybelia Avenue, Suite 120

Maitland, FL 32751

(City, State and Zip Code)

For further information concerning this matter, please call:

Mary Marko

_{at (} 407

\629-2040

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

INHS04 (01/06)

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

4 .	-	ent, or both, in the state of Florid	
1. TDC ASSE	ET MANAGEN	MENT LIMITED PA	ARTNERSHIP
Nan	ne of Limited Partnership	or Limited Liability Limited Partn	ership
2. September	r 25, 2006	3. A060000	01125
Date of filing/registration in Florida Florida doc		cument number	
4. The name of the reg Department of State:	gistered agent and the regi	stered office address as shown on t	the records of the Florida
	Chad Hagle		
•		Name	-
	100 East Syb	elia Avenue, Suite	225
•		Address	_
	Maitland, FL	32751	TAS 2
·	Cit	y, State and Zip	FE S
5. The name and Flori	da street address of the ne	ew registered agent and/or office:	DEC RETA AHAS
	Marc Hagle		C 15
•		Name	
	100 East Syb	elia Avenue, Suite	
	Florida street add	ress (P.O. Box not acceptable)	03 10A
	Maitland,	FL 32751	
•	City	y, State and Zip	Market Control of the
By: TDO AGSET H	HOLDING CORPORATION	the Florida Department of State. N, a Florida Corporation, as Genera	al Partner
Signature of General P	artner		
comply with the provis and I am familiar with	ions of all statutes relativ	gent and agree to act in this capac re to the proper and complete perfo s of my position as registered agent	rmance of my duties,
		•	
Filing Fee: Certified Copy (o)	\$35.00 ptional): \$52.50		