

A99000061081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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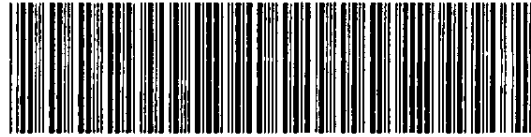
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 18 AM 11:15

T. HAMPTON

FEB 21 2011

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TPC NATIONS, LTD.

Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A99000001081

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:

Myra Homer

Contact Person

Capitol Services Registered Agent Department

Firm/Company

800 Brazos, Suite 400

Address

Austin, Texas 78701

City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Myra Homer

Name of Contact Person

at ( 800 ) 345-4647

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)

Return Acknowledgment to:



**Capitol Corporate Services, Inc.**  
P.O. Box 1831 Austin, TX 78767  
800/345-4647 *MSH*



**Limited Partnership Statement of Change  
of Registered Office or Registered Agent,  
or Both**

**Capitol Corporate Services, Inc.**  
PO Box 1831  
Austin, TX 78767  
Phone: 800-345-4647 Fax: 800-432-3622  
regagent@capitol-services.com

**Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

**DATE:** 2/14/2011  
**STATE:** FLORIDA  
**REP UNIT:** TPC NATIONS, LTD.

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Enclosed for filing please find a Limited Partnership Statement of Change of Registered Office or Registered Agent, or Both for the above referenced name, which is to be filed in your office. Enclosed is check #21216 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

Should you need to return this document for any reason please send it to:

Capitol Corporate Services, Inc.  
PO Box 1831  
Austin, TX 78767

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Capitol Corporate Services, Inc.  
Registered Agent Services



13-12752E

**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.

1. TPC NATIONS, LTD.

Name of Limited Partnership or Limited Liability Limited Partnership

2. 7/6/1999

Date of filing/registration in Florida

3. A99000001081

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Parmenter, Darryl W. CEO

Name

1111 Brickell Ave., Ste. 2910

Street Address

Miami

City

FL

State

33131

Zip Code

5. The name and Florida street address of the new registered agent and/or office:

Capitol Corporate Services, Inc.

Name

155 Office Plaza Drive, Suite A

Street Address (P.O. Box NOT acceptable)

Tallahassee

City

FL

State

32301

Zip Code

6. Such change(s) is/are effective when filed by the Florida Department of State.

  
Signature of General Partner

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
Signature of Registered Agent

**Delanie Case, Asst. Secretary on behalf  
of Capitol Corporate Services, Inc.**

**Filing Fee: \$35.00  
Certified Copy (optional): \$52.50**

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 18 AM 11:15**