

FOR 000000 3104

(Requestor's Name)

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(City/State/Zip/Phone #)

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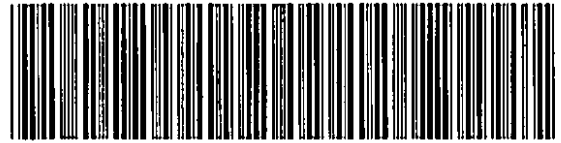
(Business Entity Name)

(Document Number)

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R. WHITE
JUL 31 2018

• COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TF Marine, Inc.
Name of Corporation

DOCUMENT NUMBER: F08000003404

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

Please return all correspondence concerning this matter to the following:

Thomas F. Mosimann Jr.
Name of Contact Person

TF Marine, Inc.
Firm/Company

841 Prudential Dr. Suite 1202
Address

Jacksonville, FL 32207
City/State and Zip Code

tom.mosimann@tfmarine.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tom Mosimann at (843) 647-6190
Name of Contact Person Area Code & Daytime Telephone Number

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Pennsylvania in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TF Marine, Inc.
2. The principal office address: 100 Pennsylvania Ave
Bryn Mawr, PA 19010
3. The mailing address (if different): 841 Prudential Dr. Suite 1202
Jacksonville, FL 32207
4. Date of incorporation/qualification: 8-1-2008 Document number: F08000003404
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Corporation Service Company
1201 Hays St.
Tallahassee, FL 32301-2525

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Thomas F. Mosimann Jr.
841 Prudential Dr. Suite 1202
P.O. Box NOT acceptable
Jacksonville, FL 32207

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Thomas F. Mosimann Jr.
Signature of an officer or director

THOMAS F. MOSIMANN JR.
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Thomas F. Mosimann Jr.
Signature of Registered Agent

7/23/2018
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

FILED

JUL 27 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA