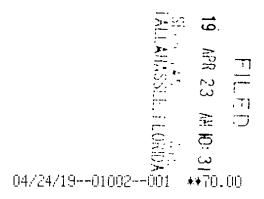


(Requ	uestor's Name)			
(Addı	ess)			
(Address)				
(City/	State/Zip/Phon	e #)		
☐ PICK-UP	☐ WAIT	MAIL		
(Busi	ness Entity Na	me)		
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Fi	iling Officer			
	<u> </u>			





500328401545



7

APR 2 4 2019 S. YOUNG William Committee of the Committee of th



## CORPORATE When you need ACCESS to the world ACCESS, INC. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## WALK IN

WALLIK IIV				
	PICI	K UP:	04/23/2019	
	CERTIFIED COPY			
хх	РНОТОСОРУ		·	
	cus			
ХХ	FILING	AME	NDMENT	
-	TB PHILLY, INC.	MENT#)	<del> </del>	
-	(CORPORATE NAME AND DOCU)	MENT#)		
_	(CORPORATE NAME AND DOCUM	MENT#)		
	(CORPORATE NAME AND DOCUM	MENT#)		
_	(CORPORATE NAME AND DOCUM	MENT#)		
	(CORPORATE NAME AND DOCUM	MENT#)		
CIAL	. INSTRUCTIONS:			

## 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.
TRIPHILLY INC.
2. The principal office address: 400 Thoms Dive, Suite 411, Thomson,
3. The mailing address (if different):
4. Date of incorporation/qualification: May 5, 2011 Document number: F11000001929
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)
Edwin F. Blanton
610 Summerbrooke Drive
610 Summerbrooke Drive  Tallahassee, FL 32312
Tallahassee, FL 32312  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporate Access, Inc.
236 East 6th Avenue
P.O. Box NOT acceptable
Tallahassee, FL 32303
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 by die corporation has been notified in writing of the change.
THOMAS M. KILBY-GM) Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity.  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 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 performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties.
Date Date
If signing on behalf of an entity:
Dany Bennett Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314