

(Pariyastada Narra)		
(Requestor's Name)		
(Address)		
- (Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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SEP 27 2010

EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TATCO PRIVATE WEALTH MANAGEMENT, LLC. Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
TARKAN TOKSU		
Name of Person		
TATCO PRIVATE WEALTH MANAGEMENT, LLC.		
Firm/Company		
0404 DOA Baulaward Cuite 400	:	
2401 PGA Boulevard., Suite 196 Address		
PALM BEACH GARDENS, FL 33410 City/State and Zip Code		
TARKAN.TOKSU@GMAIL.COM E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
TARKAN TOKSU at (561) 818-2894	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: TATCO PR	IVATE WEALTH MANAGEMENT L
2. (a) Principal office address of limited liability company	y: 2401PGA Boulevard.,Suite 196
(Note: MUST BE STREET ADDRESS)	Palm Beach Gardens, FL 33410
(b) Mailing address of limited liability company:	2401 PGA Boulevard., Suite 196
(Note: MAY BE POST OFFICE BOX)	PALM BEACH GARDENS, FL 33410
07/13/2005	L05000068977
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	TARKAN TOKSU
Registered Office Address:	12085 AVILES CIRCLE PALM BEACH GARDENS, FL 33418
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent: <u>NEW Registered Office Address:</u> (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address TARKAN TOKSU 2401 PGA Boulevard., Suite 1962 PALM BEACH GARDENS 33410
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
TARKAN TOKSU	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.
Signature of Registered Agent	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00